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# Saskatchewan Medical Journal

A MONTHLY MAGAZINE OF MEDICINE AND SURGERY

VOL. II.

DECEMBER, 1910.

No. 12

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ONE DOLLAR A YEAR.

## NOTICES

All communications, books for review, and matters relating to this publication should be addressed to the Saskatchewan Medical Journal, Box 1106, Regina, Saskatchewan, Canada.

# THE SASKATCHEWAN MEDICAL JOURNAL

VOL. 2

DECEMBER, 1910

No. 12

## Original Memoirs.

### SOME FACTORS REGARDING THE TREATMENT OF INSANITY IN PRIVATE PRACTICE.

By Ernest A. Hall.

Fellow of Royal Society of Medicine, Vancouver, B.C.

The generally assumed opinion that the development of mental abnormality marks the limit of the general practitioners' jurisdiction is an opinion no longer tenable.

We should not retreat before the development of melancholia and mania more than before the rise of temperature and delirium. These latter, we have learned, are the product of intoxication; the former, we are learning, are the product of irritation and intoxication. Presuming that the necessary control is at the disposal of the physician, he should consider the development of mental symptoms a renewed call to closer investigation and more thorough treatment. The investigation should include a thorough examination of the whole body, with especial emphasis placed upon the brain, digestive tract, and the pelvic organs, and the treatment should extend from the administration of bromides and the placing of artificial teeth to the analysis of the gastric juices, lavage of the colon, and to careful scrutiny of the pelvis. All cases, wherever possible, should be given the advantage of home or sanitarium treatment before being removed to the provincial insane hospital.

Not that I wish to cast the slightest reflection on our provincial institution, which I believe is the best in the Dominion, but I would prefer my wife or daughter to experience recovery at home rather than in the state institution.

The great majority of female insane patients, some 91 per cent. in my statistics, present well defined abnormalities of the pelvic organs and a large per cent. of those patients recover their mental condition after the removal of the pelvic disease. By this I do not mean to say that the pelvic disease is wholly accountable for their abnormal mentality, but I do say that the pelvic disease is one of the factors in the causation of the condition we call insanity.

Insanity is the psychic sum of physical abnormalities, and the removal of a measure of the disease is often sufficient to turn the mental scale. I therefore believe (and practise) that any insane patient presenting any disease which causes irritation or auto-intoxication, or interferes in any way with the patient's comfort or nutrition, that, whenever possible, the patient should be freed from such depressive factors.

Recently, during the last few weeks, two cases have come under my observation and treatment, the results of which apparently corroborate these statements.

Mrs. F., aged 30, married six years, three children, mother healthy, father drunkard. After the second child she did not appear very well for a few months. She submitted to appendectomy for right sided pain. Ten months afterwards the third child was born. A few weeks after confinement she became careless of her children and was stubborn and insolent. This continued about six weeks, when homicidal and suicidal impulses became apparent. She had prepared a pot of hot water to boil her children in, and a few days afterwards jumped over a cliff into the water attempting to drown herself.

When she came under my observation she was anemic, extremely emaciated and constipated. She was also greatly agitated and in constant fear of death. Examination showed lacerated perineum and tenderness over the right ovary.

Section showed omentum adherent to right ovary. This

was freed, the tubes resected and the perineum repaired. After a few days lavage of the bowel was begun and neuroleceithin given internally. Within ten days her delusions had disappeared. She has gained strength and up to the present is wholly normal.

Case 2. Miss H. Age 25.

Anemic, overworked, no hereditary insanity. For several weeks had exhibited well marked religious mania, cut her hair off, and once attempted suicide. Menstruation came on at fourteen. Not knowing what it meant, she bathed in cold water, with suppression for one year, and was subsequently very irregular and constipated. Digestion was imperfect, flatulence, constipation, and ill defined, right sided pain, suggestive of chronic appendicitis.

Section showed appendix thickened; it was removed with the proximal ends of both tubes; also dilatation of cervix.

Mental condition was normal one week after the operation.

This latter case gave no organic disease, but a chronic appendicitis, which no doubt was a factor in the production of the indigestion, with malnutrition, resulting in starvation of the nervous system.

The two greatest factors in the causation of mental disease, according to Clouston, are heredity and strain. An analysis of "strain" shows it to be autointoxication and irritation, which becomes abnormal sensation, the delusions being frequently the rational interpretations of these abnormal sensations, the patient preferring to believe her own sensations rather than the statements of others. This opinion I know is somewhat at variance with that of many authorities, but it is the result of my observations covering some twelve years of work in this direction.

When gastro-intestinal diseases are sufficiently severe as to seriously diminish the quality of the blood, and also to furnish toxins which are specially injurious to the nervous system, mental aberration may result. This is rendered all the more probable if it is accompanied by irritation.

The treatment of these cases comprises the removal of all

the causes of irritation and the replenishing of the tissues, especially the nervous system.

Deficiencies of the digestive juices must be supplied by artificial ingredients until restoration to the normal occurs. Auto-intoxication is to be treated by suitable lavage of the colon, a matter which is most important is the re-education of the mental centres. For this latter a specially trained nurse is desirable, one with a mental grasp capable of skillfully combating all abnormal manifestations as they arise, and of directing the patient's thoughts into new channels.

The removal of the uterine end of the tube, or the cutting out of a "V" shaped piece from the uterine horns for the purpose of sterilization is considered justifiable in all cases of pronounced mental disease. Realizing the importance of the hereditary element in the causation of insanity, I consider that we are justified in eliminating the potential of degeneracy awaiting to become manifest in the next generation.

## RECENT OBSERVATIONS ON THE THERAPEUTIC USE OF RADIUM.

By Dr. W. H. B. Aikins, Toronto.

Consulting Physician to Toronto General Hospital, King Edward Sanitarium, etc.

In collaboration with

F. C. Harrison, B.A., M.B., Toronto.

Physician to Hospital for Incurables, Assistant in Pharmacology, University of Toronto.

From the results recently published by Drs. Louis Wickham and Degrais, of Paris, and by Dr. Robert Abbe, of New York, it has been abundantly proven that radium has a distinct place in therapeutics, and moreover, a place which it seems probable will be gradually extended so as to include many conditions which formerly seemed beyond its scope.

It has been the experience of all workers with this agent that on superficial epitheliomata of the skin its action is specific. The histological changes in the cancer cells following the application of the radium rays are peculiar to themselves and quite unlike those following the use of X-rays, leucodescent light and other agents. It is true that some cases can be treated with good results by excision, the use of arsenical pastes or X-ray, but we have had cases which, after all these methods have proved inefficient, have healed readily after short applications of radium.

In the treatment of erectile angiomata and naevi excellent results have also been obtained. Dr. Wickham has reported several hundred cases of all forms of birthmarks, from port wine stains to vascular and pulsating angiomata, which have been reduced so that the skin is almost a normal color, and this without destructive cicatrix. In these cases, however, the treatment is often prolonged, as it is necessary to avoid anything approaching a destruction of the skin. The beneficial effect is due to its irritating action, producing obliterative endarteritis and fibroid change.

On true keloidal tissues radium seems to exercise again its selective action and cause the ready disappearance of these disfiguring hypertrophies of scar tissue.

Various other affections of the skin respond to radium treatment after other methods have failed. Thus it has been our own experience as well as that of others that in the treatment of lupus, chronic eczema, psoriasis, sycosis, acne rosacea and acne keloid radium is an invaluable agent.

A case of a tuberculosis ulcer on the finger of a confrere which had resisted all treatment may also be mentioned. It healed readily with a few applications of a strong radium plaque. Treatment in these conditions of the skin must be very carefully conducted, as we aim to avoid anything approaching a too destructive action.

Dr. Abbe was the first to employ the method of introducing tubes containing the radium salts into the centres of tumors, and this method he has particularly employed with excellent results in cases of sarcomata. Dr. Wickham, of Paris, has also used the same method and with equally good results.

This brings us to what seems to be the great hope from radium treatment. It is the combination of surgery with the use of radium. The surgeon can devise methods by which the apparatus may be brought into contact with deep lying malignant growths, particularly those in the various hollow viscera, such as the stomach, bladder, rectum and uterus, as well as the liver and other organs. Cases are reported in which, by such a combination, either an inoperable case has been converted into an operable one, or after the surgeon has removed all he could, radium has been used with good effect on the malignant tissues remaining.

Furthermore, radium has been used after operation for malignant growths infiltrating the operative area with the rays, so as to kill any cancer cells which may have been missed at the time of operation. Naturally in such cases the question can never be determined as to the necessity or value of the use of radium in any particular case. There might have been no

recurrence without its use, but when, as has been reported, recurrence has appeared two or three times, and finally after radium treatment it has not appeared in the same patient, one cannot help but feel that a large share of the eventual good result should be ascribed to the action of the radium rays.

#### RODENT ULCERS AND EPITHELIOMATA.

Of rodent ulcers we have had experience with seventeen. Without exception excellent results have been or are being obtained. In ten a record of previous treatment with pastes, X-rays, or leucodescent light, was admitted, but no permanent curative result had followed. It is hardly necessary to go into the minute details of all these cases. After a short application of the radium plaque, the small ulcers have almost invariably crusted over in ten to fourteen days, and when this crust detached itself the skin underneath was healed and smooth and of a pinkish tint, which soon faded to the normal color of the skin. These patients should be seen subsequently, as in cases where a slight thickening of the tissues remains an application of the rays to produce a deeper penetration without an ulcerative effect is desirable, in order to insure a good result.

Where an ulceration is more extensive, longer and more frequent applications are necessary. The treatment in these cases sometimes extends over several months, as it is necessary to feel one's way very cautiously. One such case was as follows:

Miss G., 32, referred by Dr. H. B. Anderson, came under observation August 28, 1910. Since birth she had had an ulcerated area in the right temporal region. It increased gradually as a child and from the age of ten until the present she had been under treatment of various kinds. It has twice been excised, and pastes, X-rays and leucodescent light have all been tried. It would improve, but that was all. Among those who have seen this case there is a difference of opinion as to the true condition. The early age at which it began would suggest a lupoid character, but the appearance in August suggested rather a rodent type. Dr. Louis Wickham saw the case after some

radium therapy had been employed, but would not give a definite diagnosis. He expressed the opinion that it was probably of lupoid character to start with, but had taken on the character of the rodent ulcer.

When first seen there was an area of scar tissue on the right temple the shape of an equilateral triangle of one inch and a half to each side. In this area three-fourths of an inch behind the eye, was an ulcer three-eighths of an inch in diameter punched out with thickened and slightly undermined edges. The floor was covered with pale, unhealthy looking granulations, and there was a sero-perulent discharge. Behind this ulcer, at the lower angle of the area, was another smaller ulcer of similar appearance, and just at the angle of the eye was a small ulcer, the size of a pin's head.

A strong plaque, screened, was used several times, and then the patient went home. She was seen again at the end of September. There had been a good deal of surface reaction, and a crust had formed over all the ulcers. No further treatment was given at this time. At the end of October she reported again. The crust was still present, but was easily removed, and underneath the skin was formed slightly thicker than normal and redder, but with absolutely no ulceration. The parts were radiated again, using heavier screens in order to get a deep action and soften up the tissues.

It is, of course, too early to say whether this result will be permanent, but from other cases reported in the French literature we can see no reason why it should not be.

The early result here points to the condition being one of rodent ulcer rather than lupus, as experience has shown that the latter do not react so readily as the former to the action of the radium rays.

To show the result with the common rodent ulcer the following cases may be given as examples:

Mrs. L., referred by Dr. W. B. Thistle, presented a rodent ulcer on the left side of the nose of four years' duration, which had resisted all treatment. Within one month after a series of

radium applications the ulcer healed, and is still so at the time of writing, seven months after she was first seen.

Mr. M., of New Orleans, referred by Dr. Allen Baines, showed four typical rodent ulcers on the left cheek and one on the skin of the upper lip. They had been present for two years. He was given applications of a plaque of 500,000 activity, eight hours to each spot, extending over a period of two weeks. At the end of that time the radium crusts had formed.

Under date of November 29th, the patient writes from New Orleans: "It affords me much pleasure to advise you that all trace of the affection has vanished, not even the smallest trace of a scar can be seen."

Mrs. R., referred by Dr. W. P. Caven, had a small nodule on the left side of the nose. It appeared two years ago and had increased in size until it was three-eighths of an inch in diameter. It was not ulcerated. It had begun to pain a short time before. She had had no treatment of any kind. She was given a short application of a strongly active plaque, and on presenting herself six weeks later the nodule had quite disappeared.

Mrs. D., referred by Dr. J. Noble, rodent ulcer of the forehead; crust has formed, but is not yet detached.

Miss F., referred by Dr. Yeo, rodent ulcer at the tip of the nose, causing great disfigurement, which has completely healed, leaving no scar.

Mrs. C., referred by Dr. F. A. Clarkson, small rodent ulcer just below the eye, which quickly responded to treatment.

Mrs. M., referred by Dr. Barbour, of Burk's Falls, rodent ulcer of temporal region. Radium was used on two separate occasions and the ulcer is now quite healed.

*Epithelioma of the Lip.*—Two cases of superficial epitheliomata of the lip have responded splendidly to treatment. Other epitheliomata have been referred on which prolonged treatment will have to be carried out, and on which we hope to report more fully later. To mention a few:

Mrs. B., referred by Dr. S. M. Hay, for an epithelioma of

the buccal mucous membrane, which had recurred after removal. She was seen six weeks after treatment, and there had been no re-appearance; she will, however, have to be kept under observation from time to time.

A case of epithelioma of the lip, with glandular involvement, considered inoperable, referred by Dr. Howitt, Guelph:

Mr. B., referred by Dr. Partridge, of Burk's Falls, with a recurring epithelioma of the buccal mucous membrane.

Mr. A., referred by Dr. N. A. Powell. It is an epithelioma of the lip in which extensive dissection had been done. There was constant pain and two masses which had recently begun to increase in size. Since beginning treatment the pain has ceased, but it is too early to report further as yet.

*Fungating Epitheliomata.*—Fungating cutaneous epitheliomata are particularly suited for radium action, and various techniques can be adopted depending on the individual case under observation. "Cross-fire" action often gives excellent results with the use of different forms of filters. A preliminary curettage and removal of the vegetations is of help in decreasing the time required for cure, but is not absolutely necessary.

T. F. T., *æt.* 54, referred by Dr. Bowman, of Penetanguishene, Ont., presented on October 29th a fungating mass, as large as a 50 cent piece, below and behind the left ear. There had been a small ulcer for about five years, but latterly the growth had been very rapid. The growth was covered with cauliflower excrescences and projected three-quarters of an inch above the surrounding skin. The edges were hard and everted, and the tissues about were quite hard, as though the growth extended to some depth. There were no enlarged glands to be felt. Under local anæsthetic the vegetations were removed, and the next day radium applications were made. These were repeated for four days, and then the patient returned home. He was seen again in three weeks, at which time all that was observed was a small, healthy ulcer, one-half inch in diameter. The epithelium was growing over it, and it looked as though it should be healed completely in another two weeks. The edges were quite soft, as were all the surrounding tissues. A few

more applications were made to stimulate the healing, and he again returned home. On December 15th he reported it "practically healed, with only a small crust to be detached."

*Melanotic Carcinoma.*—Mrs. C., referred by Dr. Chapman, of Kenora, melanotic carcinoma of the left cheek; there has been marked improvement, but the case is still under observation.

Mrs. W., referred by Dr. H. J. Hamilton, melanotic carcinoma of the cheek, as large as a small marble. After three series of treatments it has quite disappeared.

#### SARCOMATA.

The case described below, together with one other case of cancer of the uterus, forms perhaps the most interesting study we have made.

R. J. B., *et.* 53, farmer, referred by Dr. Wardlaw, of Galt, Ont. In February, 1909, he noticed a lump at the angle of the jaw, on the right side. X-rays were used without any apparent effect as the mass kept increasing. In April, 1910, the tumor was removed and showed a small round-celled sarcoma. In June it recurred. Excision was again advised, but as a facial paresis had followed the first operation, the patient would not consider further operative procedures. He was therefore referred for radium treatment.

At first, very thorough radiation was carried out with plaques, and some decrease in the size of the mass could be noticed. The cross-fire method was here used, a plaque being placed on each side of the tumor.

The beginning of October the mass was two inches in diameter and elevated three-fourths of an inch above the level of the surrounding skin. It was quite firm and seemed attached to the underlying angle of the jaw. On October 5th, an incision was made into the tumor, and a small silver tube containing 1 centigram of pure bromide of radium, with an activity of

2,000,000 was inserted deeply into its centre. It was left in place 24 hours, and the result was most remarkable. At the end of this time there was a cavity present, into which the finger could be inserted, the growth felt much softer and was more freely movable. From the opening thus made broken down necrotic tissue was discharged, and the size of the tumor visibly diminished. Twelve days after this first treatment the tube was inserted again two hours daily for six days, with the plaque applied externally to produce the cross-fire action.

The patient then returned home and reported in one month. On inspection no tumor mass could be seen at all. On palpation two small masses, which felt like scar tissue, were present, one just in front of the ear, the other behind the angle of the jaw.

We regard this as a most gratifying result, although the patient can in no sense be regarded as cured, and will be required to be watched from time to time. He would be a foolish man indeed who would make any such claim so soon as this, but others report cases of round-celled sarcoma, removed and free from recurrence after five years, and we see no reason why the same result should not be looked for here.

#### CANCER OF THE UTERUS.

In many cases of cancer of the uterus radium can be of great service. Dr. Wickham has reported cases regarded as inoperable, which were so reduced as to render a late operation possible while where there had been recurrence in the scar tissues in the vault of the vagina following operation radium was effectual in removing it. In all cases the most striking effect was the rapidity with which the discharge and pain ceased after a very few applications.

The condition is one that offers itself very readily for treatment, on account of the facility with which the apparatus can be applied. Radium tubes can be introduced into the body of the uterus or radium plaques can be applied to the cervix. We have ourselves had the opportunity of verifying these beneficial results in the following cases:

A patient, æt. 53, referred by Dr. Tuttle, of Tweed, Ont., first noticed a bloody uterine discharge in January, 1910. She did not consult a physician until June. The cervix was cauterized but serious hæmorrhage recurred, and in July she underwent an operation at the hands of a leading gynæcologist in Toronto, when the uterus was curetted, and the cervix amputated. This was all that was done, as, in the surgeon's opinion, the left ureter and bladder were involved and hysterectomy would not be justified. A very grave prognosis was given.

On August 5th she consulted regarding radium treatment. The discharge, pain and irritability of the bladder had continued. Dr. F. A. Cleland, Assistant Gynæcologist of St. Michael's Hospital, Toronto, was called in consultation, as it was felt that the treatment should be surgical, if possible.

The condition at that date, as reported by Dr. Cleland, was as follows:

"On August 15th, in the vault of the vagina and where the cervix had been removed, was a raw, bleeding, granular surface, about two inches in diameter, extending into the vaginal wall. The left side was more involved than the right, and in order to remove the growth completely, an extensive dissection would have been required and probably the removal of the left ureter.

"The uterus was fixed on the left side, and examination by bi-manual method caused a good deal of pain. The body of the uterus was not enlarged.

"In view of the extensive operation which would have been necessary, and the uncertainty of complete removal, radium treatment was advised."

Treatment was accordingly instituted and from August 15th to October 7th, with two weeks' intermission, a strong radium plaque was placed against the cervix for twelve hours every night. The discharge ceased after the first few applications. The pain disappeared, and the bladder condition improved. On October 7th, a tube containing one centigram of pure bromide of radium in a catheter was inserted into the uterus for fifteen hours. The patient then returned home. Examinations made from time to time had shown a continuous

improvement and lessening of the area of ulceration. On November 30th, she reported, and Dr. Cleland again examined her and reported as follows:

"On November 30th the raw surface was reduced to an area about half an inch in diameter, which showed no tendency to bleed as formerly. The uterus was more movable, but still somewhat fixed on the left side. The patient reported herself as suffering no pain nor discomfort of any kind, and as having gained about 15 pounds in weight. The improvement in the local condition was most marked and an operation could now be undertaken with more certainty of success. But, owing to the improvement under the radium treatment it seems advisable to continue it for some time yet."

#### EXOPHTHALMIC GOITRE.

Dr. Abbe was the first to employ radium in the treatment of this condition. This was effected by making incisions into the thyroid gland, into which radium tubes were inserted. A great decrease in the size of the gland followed, with amelioration of the nervous symptoms, and this result has continued. Dr. Wickham, of Paris, has also successfully treated cases by the plaques, with "cross-fire."

A case which presented itself recently has given us an opportunity to observe the action of radium in this condition.

Mrs. M., *æt.* 31, noticed a small lump at the root of the neck five years ago. Local applications were used, but there was no change one way or the other. One month ago it began to grow, particularly on the right side. The tumor protruded and began to cause distress in breathing, speaking and swallowing. At the same time she began to feel tired, with loss of energy and appetite. Examination showed enlargement of the isthmus and right lobes of the thyroid, the tumor being quite hard in consistency. The circumference of the neck was 15 inches. The pulse rate was slightly increased.

Applications of radium plaques have been made and already within three weeks there has been marked improvement. The

tumor has decreased, so that the circumference of the neck is only 13 inches and the pressure symptoms have quite disappeared. The improvement in this short period of treatment has been so marked that a further decrease in the size of the thyroid can confidently be expected.

#### POST-OPERATIVE PROPHYLAXIS.

Dr. Wickham, in his latest papers insists strongly on the association of radium with surgery. He claims that in many cases the radium rays will turn an inoperable case into an operable one, and further, that after operation for malignancy, when, no matter how extensive the dissection, one can never be sure of having removed all the cancerous tissues, radium should be used over the scar and area of operation, as a prophylactic measure to destroy any stray neoplastic cells.

In three cases we have so applied the treatment, two being sarcomas and one a carcinoma. In the latter case, which affected the breast, the radical operation was performed, and some enlarged glands were present in the axilla, which on microscopic examination were shown to be simply inflammatory. Dr. Adam H. Wright referred her for radium applications over the line of suture, ten days after operation. This treatment was repeated in one month. Whether the treatment has had any effect we will probably never be able to tell, either one way or the other, as of course surgical treatment alone is very often effectual in these cases.

The other two cases were sarcomata. One was in a male infant, in which a round-celled sarcoma had developed at the side of the anus. It was removed by Dr. Wallace Scott, of Toronto, but reappeared in two weeks. Dr. Scott operated again, and before the sutures were out, referred him for radium treatment.

Very thorough radiation was carried out and has been repeated at intervals since, with the result that there has been no recurrence during four months, although all who saw the case regarded it as one in which recurrence would probably occur, and gave a very grave prognosis.

The other occurred in a man of 61, who was referred by Dr. Kidd, of Ottawa, on the suggestion of Dr. Wickham, of Paris. He had had a spindle-celled sarcoma of the tissues on the right side of the neck, which had been removed first in Ottawa in May, 1908, and, owing to a recurrence, again in May, 1910. It soon recurred, however, and a very extensive dissection was done in London, England, in August, 1910. Six days after the operation he went to Paris, where radium applications were made by Dr. Wickham for a period extending over three weeks. As a prophylactic measure, he was advised to have this treatment repeated at intervals and in Toronto in October, 1910, was given another thorough radiation over the field of operation, and particularly at points where the scar tissue was in excess. By this method we believe any sarcoma cells can at least be held in check, if not actually destroyed.

From the experience we have had with this agent during the past few months abundant opportunity has been given to verify the results obtained by others in its therapeutic use.

Judging from results already obtained, we feel that radium therapy is only in its infancy, and that the future will disclose other pathological conditions in which it can be of great service.

# THE SASKATCHEWAN MEDICAL JOURNAL

HARRY MORELL, M.D., C.M., *Chairman of Publication Committee*

All communications relating to this publication should be sent to the  
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## Announcement

This number will be the last which will be issued under the name of *The Saskatchewan Medical Journal*. Henceforth it will be published as *The Western Medical News*.

*The Saskatchewan Medical Journal* was first issued by the Publication Committee of the Saskatchewan Medical Association as a quarterly. The second year it was issued as a monthly, gaining a great amount of recognition thereby. Later it was named as the Official Organ of the Alberta Medical Association. This, of course, still increased its prestige and circulation.

During all this time of publication those responsible have done their best to give the general practitioners of Western Canada their best efforts, and certain measures advocated have reached a happy termination. Many loyal friends have come to our support and we have received great encouragement to continue in the work. Several prominent medical men have promised to act as collaborators.

Our object is to produce a journal which will be a source of strength to the Medical Profession in the Western Provinces of Canada.

The publishers desire the co-operation of the profession, as the success of this publication depends upon their support.

## Editorial Notes

A bill which has passed the second reading in the Alberta Legislature allows the incorporation of the Osteopathic Society of Alberta. This Act gives osteopaths of the Province of Alberta the same rights and privileges as the regular practitioners licensed by the Council of the College of Physicians and Surgeons of Alberta. The rights and privileges by this Act contemplate the signing and certifying to deaths and births. At the present we are unable to give any further information as to the progress of the bill, but venture to hope that the profession of Alberta will oppose this measure drastically and energetically.

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At the recent meeting of the Council of the College of Physicians and Surgeons of Saskatchewan held in Regina, the information given out in press dispatches was "that the majority of the members of the Saskatchewan Council were favorable to representation by province and not on a numerical basis. The Council will decide at a later date whether or not it would be advisable for them to send a representative to Ottawa to meet representatives of other Councils and discuss the legislation affecting the scope of the work of the Dominion Council. The members were favorable for the most part to such action. Numerous methods of overcoming the difficulty of improper representation on the Dominion Council were gone into, but no definite action was taken."

The editors of this publication intend to formulate a set of questions which will be submitted to every active medical practitioner in Saskatchewan and not until then can we nor anyone say how the profession in this Province will voice its opinion.

After all, we believe that the Roddiek Bill will become a law and that the Province of Saskatchewan will never become a stumbling block in the way of progress.

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The Council of the College of Physicians and Surgeons of Saskatchewan was organized in July, 1909. The Act states (Section 4, Cap. 28) until such time as a council is elected for such College the affairs of the College shall be vested in a person appointed by the Lieutenant Governor in Council. The person appointed was Dr. G. A. Charlton, of the Provincial Laboratory and general factotum of the Department of Agriculture. From the time of the appointment to the election of first meeting of the council was about six months. One of the first acts of the newly elected council was the passing of an honorarium to Dr. Charlton of about *twelve hundred dollars, for what?* It is rumoured that the books of the council are in the hands of the printer and also that the official Medical Register is in preparation; so we may expect to have, in the course of a few months, these items which are called for in the Medical Profession Act, section 29.

The question may be asked why Dr. Charlton should not continue as the Registrar of the Council if this body so wish. Our objections are as follows:

1. Dr. Charlton has enough work to do as Director of the Laboratory of Pathology, Bacteriology, Chemistry, etc. He draws a salary from the Department of about \$2,500 to \$3,000 per year.

2. The work done in this laboratory is not efficient.

3. One person should not monopolize the salaries of two well paid positions. The Director of the Provincial Laboratory has enough on his hands for one ordinary individual to attend to and do it properly.

It is a mystery why the Minister of the Department of Agriculture allows one in the employ of his department to

antagonize a large proportion of the profession. Surely an executive of a department of the Government in power has enough worry without having at some future period a matter which may embarrass him in the explanation of this policy.

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We urge those whose duty it is to see that the New Regina General Hospital is to be equipped in a modern, up-to-date manner. Reference is made to the following:

The New Regina General Hospital 1. A thoroughly equipped electrical room, containing an X-ray outfit, wall plate with the ordinary currents, as galvanic, faradic, combined currents, converter for lighting diagnostic lamps, cautery current, and other currents, either for diagnosis or treatment.

2. A room fitted up with a dark chamber and appliances for diagnosis and treatment of the eye, ear, throat and nose. In this department there should be a compressed air chamber, McKenzie illuminator, etc.

3. A room fitted up as a clinical laboratory, with microscope, microtome, centrifuge (electric), hot air, hot water ovens and incubator.

This laboratory should be under the direction of the city health department and under the jurisdiction of the Health Officer. This would do away with the relying on the Provincial Laboratory for the testing of milk, water and other investigations now done there.

We have no hesitation in saying that, without the above, it is utterly impossible to do justice to the staff of the institution, and to give patients the benefit of modern scientific methods. We are prepared to go further, and state that it would be much better to reduce the capacity of the hospital by twenty-five beds, than not have the equipment as above.

The tendency of modern discoveries in medicine has been to establish in a constantly increasing degree the certainty that a very large number of the diseases which affect mankind and the higher animals, and even a high probability that all of them, are the direct consequences of a struggle for existence between the suffering organism and a swarm of invading parasites, some of appreciable magnitude, others of microscopic minuteness, but usually possessing, in that case, extraordinary powers of reproducing their kind in countless multitudes.

Few things were more curious than the manner in which the discovery of the parasitic character of syphilis at once threw a flood of light upon its ordinary course and symptoms. Before the attainment of this knowledge all that could be said of the disease was that it was communicable by contact, that it presented well-defined groups of symptoms at successive stages, that it might remain dormant for years and reappear independently of fresh infection, that it was frequently imparted by a mother to her unborn babe, and in this way blighted the lives of many by whom it had not been personally contracted. Medical research had continually enlarged the known sphere of its disastrous influence, and had shown that many diseases of the central nervous system, forms of paralysis and forms of insanity, once not even suspected to be connected with syphilis, are really nothing more than some of its delayed manifestations. It had been found that scarcely any organ or structure of the body could claim exemption from its influence; and its action upon the arteries, besides being a common cause of aneurism, was frequently responsible for deaths or paralyzes due to hæmorrhage on the brain. Although particular conditions were often relieved for a time by potassium iodide, the only really

curative agent known until recently was mercury; and it was well established that this carefully administered for a period of at least a twelvemonth, might in the majority of cases be relied upon to produce a successful result.

#### THE WORK AT FRANKFURT.

The Institute of Chemotherapy, at Frankfurt, under the direction of Professor Ehrlich, has for many years been engaged in experimental work upon the curative values of various chemical compounds, and the professor has lately directed his attention largely to the subject of parasiticides capable of being safely administered to the human subject. Among other curious results he has found that conclusions as to the action of agents thus administered cannot be deduced from their effect upon the parasites when these have been isolated from the body; it appearing that some preparations, which are highly fatal to parasites when isolated, expend their forces upon the tissues of the body into which they are injected and leave the parasites therein untouched. It fortunately happens that birds and animals are subject to various parasitic diseases, and so afford abundant material for experimentation; and in the use of these opportunities Professor Ehrlich and his assistants had tried 605 different preparations before they discovered one which they regarded as satisfactory. This, which, on account of its numerical position, is now described as "Preparation 606," was suggested by a Japanese physician, Dr. Hata, who was working in the Frankfurt laboratory; and it is described chemically as "dioxo-diamido-arseno-benzol." It is a yellow powder, put up in glass tubes which are exhausted of air before being sealed, and it is administered to patients by subcutaneous or intramuscular injection, conducted with the strictest anti-septic precautions. One-fifth of the dose that is poisonous to a fowl will suffice to cure one that is suffering from fowl spirillum fever; and it was soon found that a single injection caused the complete disappearance of *Treponema pallidum* from the body of a rabbit which had been inoculated from a syphilitic sore.

## THE REMEDY IN ENGLAND.

Notwithstanding the high hopes justified by this discovery, Professor Ehrlich, with praiseworthy caution, determined to satisfy himself and his laboratory colleagues with regard alike to the safety and to the efficacy of the new preparation before he suffered it to be used elsewhere for the treatment of syphilis save by a few carefully selected persons; and it is therefore not at present accessible to the medical profession generally. A considerable number of skilled observers have, however, visited the clinique at Frankfurt; and one of these, Dr. E. Emery, of the Lazare Hospital, Paris, published in September an exceedingly valuable account of his visit and of "ce que j'ai vu en Allemagne." Since then a supply of "606" has been kindly furnished by Professor Ehrlich to some English observers; and a detailed and highly interesting account, by Messrs. McIntosh and Fildes, of its employment in 16 cases of syphilis treated at the London Hospital is published in the *Lancet* of the 10th of December. Professor Ehrlich's endeavor is so to regulate his treatment as to destroy the whole of the parasites in any patient by one injection of the remedy; thus curing the disease at a single *coup*, and not leaving any *treponemata* capable either of secreting themselves in deep organs or of becoming immune to the action of the drug and possible sources of mischief at some future time. The results as described both by Dr. Emery and by all others who have witnessed them are marvellous. Dr. Emery saw a large number of patients, and he describes the treatment as absolutely and certainly curative whenever the case is not complicated by the presence of non-syphilitic disease affecting vital organs, or by conditions of extreme debility or exhaustion.

A book dealing with the whole subject has now been published by Professor Ehrlich and Dr. Hata themselves; and, according to a notice in the *British Medical Journal* will shortly be translated into English.

## THE AMERICAN PROCTOLOGIC SOCIETY'S PRIZE.

*The American Proctologic Society's Prize for the Best Original Essay on any Disease of the Colon by a Graduate of (not a Fellow of the Society) or a Senior Student in any Medical College of the United States or Canada.*

The American Proctologic Society announces through its committee that the cash sum of \$100 will be awarded as soon as possible in 1911 to the author of the best original essay on any disease of the colon in competition for the above prize.

Essays must be submitted to the Secretary of the committee on or before May 10, 1911. The address of the Secretary is given below, to whom all communications should be addressed.

Each essay must be typewritten, *designated by a motto or device, and without signature or any other indication of its authorship, and be accompanied by a separate sealed envelope, having on its outside only the motto or device contained on the essay, and within the name, the motto or device used on the essay, and the address of the author.* No envelopes will be opened except that which accompanies the successful essay.

The committee will return the unsuccessful essays, if reclaimed by their writers within six months, provided return postage accompanies the application.

The committee reserves the right not to make an award if no essay submitted is considered worthy of the prize.

The competition is open to graduates of medicine (not fellows of the Society) and to members of the senior classes of all colleges in the United States or Canada.

The object of the prize and competition is to stimulate an increased interest in and knowledge of Proctology.

The committee shall have full control of awarding the prize and the publication of the prize essay, and it shall be the property of the American Proctologic Society. It may be published in the Transactions of the Society and also as a separate issue if deemed expedient. The committee may increase its membership if deemed advisable.

DR. DWIGHT H. MURRAY, *Chairman*,  
DR. SAMUEL T. EARLE,  
DR. JEROME M. LYNCH,  
DR. ALOIS B. GRAYHAM,  
DR. LEWIS H. ADLER, JR., *Secretary*.  
1610 Arch St., Philadelphia, Pa.

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### Obituary

The death is announced from Ruthven, Kirkmichael, Banffshire, of Dr. Robert Grant, C.B., R.N., at the age of 68. He joined the Navy as surgeon in 1868, and served with distinction for 34 years. He served in the Zulu and Kaffir Wars of 1877-9, and in 1879 he had sole charge of the hospital ship on the Cape Town station during an outbreak of smallpox. He served in the Egyptian War of 1882 and in the Sudan War of 1884. He was promoted Fleet Surgeon in 1888, Deputy-Inspector-General of Hospitals and Fleets in 1897, and Inspector-General in 1901. On the occasion of the Coronation King Edward VII. conferred on him the dignity of Companion of the Bath.

## News Items

On behalf of a donor, who withholds his name, the Chairman of the Board of Directors of Columbia University and Robert W. De Forest, President of the Presbyterian Hospital, announced tonight that \$1,300,000 had been pledged for the perfection of an affiliation between the hospital and the medical school of the university. Though the name of the actual donor is unknown, the gift comes through Ed. S. Harkness, a member of a wealthy family of New York and Cleveland, who adds \$200,000 himself.

At the annual meeting of the Governors and Council of King Edward's Hospital Fund for London, it was reported that the amount received up to December 10th was £146,584 10s. It was agreed to distribute £148,000 among the hospitals and to set aside £2,000 for amalgamation of throat and ear hospitals. A sum of £5,000 will also be distributed among convalescent homes.

At an inquest recently concerning the death of May Walter, 32, who died in Guy's Hospital while under the influence of an anæsthetic, the coroner observed that 46 deaths under anæsthetics had occurred at Guy's Hospital in the last 9½ years. Dr. Claude Mills, one of the surgeons at Guy's, said the woman was given ether by the open method for an internal operation. He added that when a doctor performed an operation, and the patient died under the anæsthetic, it got into the papers and it was bad for him in the district in which he might afterwards practise. He did not advocate the holding of these inquiries in private. Let them be public by all means. As far as the ordinary press was concerned, "Another Scandal at Guy's" made

a capital headline. Dr. Bernard Spilsbury, who made a *post mortem* examination, said the operation was a necessary one, and the woman was thoroughly well prepared, but she was in a debilitated condition. The jury returned a verdict of "Death from misadventure."

Major Ronald Ross, who was awarded the Nobel Prize for Medicine in 1902, and who is staying in Stockholm for the celebration of the tenth anniversary of the foundation of the Nobel Institute and for the centenary of the Carolin Institute, the Higher Medical School in Stockholm, has been appointed Honorary Doctor of Medicine. A similar honour has been conferred on M. Emanuel Nobel, nephew of the founder of the Nobel Prizes, who is also attending the two celebrations.

The governing body of the Imperial College of Technology has invited Professor Friedrich Czapek, of the University of Prague, to occupy the new Chair of Plant Physiology and Pathology in the college. The chair has been founded to train young men to act as advisers in matters connected with agriculture at home and in the Empire abroad.

Mr. E. W. Adams, M.D. (London and Sheffield), has been appointed to the post of Lecturer in Materia Medica and Assistant to the Professor of Materia Medica, Pharmacology, and Therapeutics.

Mr. R. J. Pye-Smith has resigned the Professorship of Surgery, and the Council has adopted a resolution expressing its appreciation of the distinguished services which he has rendered to the cause of medical education in Sheffield.

## Book Reviews

**SURGERY OF CHILDHOOD, INCLUDING ORTHOPAEDIC SURGERY.** By *De Forest Willard, A.M., M.D.* (Univ. of Pa.), *Ph.D.*, Professor of Orthopaedic Surgery, University of Pennsylvania, etc. 800 pages, with 712 illustrations, including 17 in colors. J. B. Lippincott Company: Philadelphia, London and Montreal. Cloth, \$7.00.

It is a question to the reviewer whether or not the gifted author of this work was permitted to see the result of his labor, and the reception of it by the profession, for the book was hardly dispatched from the hands of the publishers when he was called to the Great Beyond. Dr. De Forest Willard, of Philadelphia, died, after a short illness, in his sixty-fifth year. "He was both a general surgeon of extensive experience and an orthopaedist of national reputation."

This volume, "*The Surgery of Childhood*," is a splendid work in every way. From the first page to the last it is interesting. The classification is practical and convenient. The illustrations are many (over 700) and drawn mostly from photographs and skiagrams of patients. A large proportion of the work is devoted to Orthopaedic Surgery. "This part of the work is especially worthy a recommendation since it not only gives evidence of wide knowledge of the subject, but also of the very careful and painstaking preparation."

Treatises upon General Surgery are many, and a number of excellent volumes on Orthopaedic Surgery have been published, but works devoted to the Surgical Conditions of Childhood are few. The effect of infancy and youth upon abnormal conditions warrants separate consideration, especially as regards diagnosis, prognosis, and treatment. In the new-born the rapid formative changes of embryologic development are still active, and during the first decade of life constant change is to be expected, a fact

that has an important influence upon the examination and treatment of children.

For twenty years the author has been urged to put in permanent form his personal surgical experiences, but until now the pressure of other duties has exhausted the time and strength necessary to the accomplishment of this work.

No attempt has been made to make this volume encyclopedic in character, the endeavor having been rather to select and present methods of diagnosis and treatment that in more than forty years of practice have been proved by personal use to be of rational service.

The publishers have done their work well and Messrs. Lippincott are to be congratulated on the result. This volume is strongly recommended.

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INTERNATIONAL CLINICS. Quarterly. Vol. 3. Twentieth Series. These are illustrated lectures on all subjects of medical and allied sciences by leading members of the medical profession throughout the world. Edited by *Henry W. Cattell*, Philadelphia. Published by J. B. Lippincott Company, Philadelphia, London and Montreal.

Included in this volume are some special articles, which we note as follows: "The Present Status of Bacterin Therapy," by B. A. Thomas, A.M., M.D., Univ. of Pa.; "Uncinariasis," by M. Howard Fussell, Philadelphia. The work is illustrated by many fine plates and figures. This issue of the "Clinics" is up to its usual high standard.

HARRY MORRELL.

## Correspondence

WALKERVILLE, ONT., *December 22, 1910.*

To the Editor,  
Saskatchewan Medical Journal,  
Box 1106, Regina, Sask.

Dear Sir,—

We ask your kind assistance in the way of disposing of a false impression which may have been created in the minds of your readers by wholly erroneous reports which have appeared in the Montreal Star (December 17), the Toronto Globe, the Toronto Star and the Toronto News (December 15).

All four of the papers mentioned made the picturesque announcement that we had just declared a cash dividend of 15 per cent. and that, in addition thereto we had paid, during 1910, 30 per cent. This is perfectly ridiculous. During 1910 we paid exactly the same dividend that we declared in 1909, namely,  $12\frac{1}{2}$  per cent. of the par value of the stock, plus an extra dividend of  $2\frac{1}{2}$  per cent. That is all there is to it. In other words, we are paying, for 1910, 15 per cent. instead of  $12\frac{1}{2}$  per cent. There is no "melon" in the case. Would that there were!

The purchaser of our stock at present market prices receives a return of less than 4 per cent. on his investment. Why an industrial stock—and as you know "industrials" are by no means the pets of prospective investors—should command a selling price so much above its par value may be explained by reasons which are perfectly familiar to those who have employed our products; modesty forbids us to recite them.

Very truly yours,

**PARK, DAVIS & CO.**

Wm. M. Grant, Manager.

## Items of Interest

### An Unconventional Cough Syrup

There are "cough syrups" without end. Some of them, it is needless to say, have little or no therapeutic value. Conversely, there are some that no physician need hesitate to prescribe. One of these—Syrup Cocillana Compound (P. D. & Co.)—is so exceptional in many particulars as to be worthy of special mention just now, when coughs are so plentifully in evidence. By its name no one would recognize it as a preparation for "coughs" and "colds," and this, in connection with its general efficiency, constitutes one of its chief claims to distinction. It is a product which the layman knows nothing about. It does not encourage counter-prescription or self-medication. It was designed especially with reference to the needs of the prescriptionist.

The formula of Syrup Cocillana Compound, which of course is plainly printed on the label, is quite unusual. Let us briefly consider its components: *Euphorbia pilulifera*—serviceable in the treatment of chronic bronchitis and emphysema; wild lettuce—a mild and harmless narcotic, useful in spasmodic and irritable coughs; cocillana—valuable expectorant, tonic and laxative, exerts an influence on the respiratory organs similar to that of ipecac; syrup squill compound—serviceable in subacute or chronic bronchitis, as an expectorant, and as an emetic in croup; cascara—the bitter glucoside of *cascara sagrada*, useful for its laxative action; heroin hydrochloride—a derivative of morphine and extensively prescribed in the treatment of cough, especially of bronchial origin; menthol—stimulant, refrigerant, carminative and antiseptic, serviceable in coughs of pharyngeal origin.

Syrup Cocillana Compound would seem to be worthy of extensive prescription.

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In the amenorrhea of "shop-girls" debilitated by overwork and insufficient exercise, Ergoapio (Smith) has proved particularly beneficial. It is likewise notably serviceable in scanty menstruation of women who have borne children in rapid succession.

In cases of acute suppression arising from sudden exposure to cold or dampness, change of climate, shock or similar causes, the preparation should be administered in doses of one capsule three or four times a day until the function has been re-established.

When the amenorrhea is of long standing and due to general debility, anemia, sexual depression or other systematic impairments, one capsule should be administered night and morning throughout the intermenstrual period.

## CANCER: ITS CAUSE AND CURE

The *Dominion Medical Monthly* has the following:

*Cancer in Ontario.*—Whilst tuberculosis is declining in Ontario, cancer is increasing. Towards reducing cancer **nothing** has been done, and the reason is all too obvious—its exact nature is not known to medical science.

The deaths from cancer are thus recorded: 1902, 1,048; 1903, 1,156; 1904, 1,253; 1905, 1,224; 1906, 1,411; 1907, 1,329; 1908, 1,348.

Having in mind, then, the undoubted good work which has been done in checking the spread of tuberculosis and the good work which may be done in checking the increase of cancer, there would appear to be every reason that the Government of the Province might wisely consider it a justifiable procedure to place a special competent official in charge of all the work pertaining to the prevention and spread of these two diseases in Ontario.

Recently Sir Alfred Gould, before the Royal College of Surgeons, as the subject of his Bradshaw Lecture, spoke, in part, as follows:

Cancer, he said, is the result of a breach or failure of fundamental cell-law. The conditions known to exert an influence on the causation of cancer are age, sex (women being much more subject than men), prolonged exposure to X-rays, and alcohol. Statistics of the mortality of various occupations from certain diseases reveal the fact that cancer is twice as frequent among brewers and publicans as among clergymen, and that the cancer incidence in any trade varies with the attendant habits as regards alcohol.

In conclusion, the lecturer referred to various cases of cancer which he has treated at the Middlesex Hospital, and though in some of these cases the disease was not "cured" in the sense of being wholly and permanently removed, yet in several there was a strong reason for thinking that the word "cure" could be justly used.