EDITORIAL

Low back pain often accompanied by nerve root irritation is one of the major problems of Army practice. The diagnosis of the lesion can usually be made on the history and clinical signs with the help of plain radiography, but often there is an element of doubt. Because an increasing number of these patients are now treated by surgery, accurate diagnosis becomes all the more important.

Bretland and Hesketh make a valuable contribution to the subject in their observations on myelography in Singapore published in this issue. Their discovery of unexpected pathology in six cases out of twenty six investigated for low back pain is remarkable and differs from the experience at the Royal Herbert Hospital, Woolwich. Here, during the past three years no tumours were found in 170 myelograms. In six cases the findings were equivocal but in the remainder the clinical diagnosis of prolapsed intervertebral disc was confirmed. These findings are probably due to the selection of patients for admission to this particular hospital.

The paper is of value in demonstrating that myelography can help the surgeon to localise the lesion and may warn him of unexpected pathology.

Myelography is a simple and safe procedure in the hands of an experienced radiologist but it is open to abuse if used indiscriminately. When first injected the dye runs freely in the subarachnoid space on tilting but after three or four weeks it tends to become fixed and scattered and the investigation cannot be repeated. Its use therefore must be controlled by the surgeon who is himself prepared to operate on the case, and has the facilities at hand for doing so. Only in this circumstance is myelography justified.

It has no place in the routine investigation of low back pain outside an orthopaedic or neurosurgical centre.

NEEDLELESS VACCINATION

The chance observation that jets of liquid under pressure were capable of penetrating the skin has led to many attempts to produce an efficient jet injection machine which would replace the slow, costly and, to small children, frightening syringe and needle. There is no task in which this apparatus would be more welcome than mass intradermal vaccination so commonly practised in the Army. The British Medical Journal (1966) reviewed the considerable literature on the subject, commented on the improvements in design of jet injectors which had largely overcome the disadvantages of earlier models, and stated that cross-infection does not occur as a result of their use.

In this issue we publish an article by Power on the use of a jet injector for intradermal B.C.G. vaccination of school children. He observed that there was contamination of the nozzle of the Dermo-jet by oozing from the blister produced by the vaccination. Noble (1967), using T.A.B.T. and cholera vaccine, observed froth on the nozzle after nearly every injection and it was bloodstained in at least a fifth of his volunteers. Contamination of the nozzle by blood or serous fluids involves at least a theoretical risk of the spread of hepatitis virus from carriers to susceptible individuals. Power draws attention to this risk, which he considers small if scrupulously aseptic techniques are used, but is his technique of wiping the nozzle with sterile swabs an adequate measure for preventing cross-infection?
Wilson (1967) drew attention to a variety of accidents due to immunological procedures which would not have happened if the risks involved in their use had been understood. Commenting on the prevention of syringe-transmitted hepatitis, he expressed doubts that needleless injection was a satisfactory alternative to the use of a sterile syringe and needle for each individual. Power’s warning adds to these doubts. It must be a matter of principle that only safe immunological procedure are used. Until the risks of cross-infection by needleless injectors have been clearly defined, they should not be used for mass vaccinations.

REFERENCES

Noble, J. E. (1967) Personal communication.

BIRTHDAY GREETINGS

A copy of the telegram sent to Her Majesty Queen Elizabeth The Queen Mother on the occasion of Her Birthday is given below:

Representative Colonel Commandant and All Ranks Royal Army Medical Corps with their humble duty send their greetings to Her Majesty The Queen Mother their Colonel in Chief on Her Birthday.

The following gracious reply has been received:

I send to you and to All Ranks Royal Army Medical Corps My Warmest Thanks for your kind message of Loyal Greetings on My Birthday.