Correspondence

Some of the newest methods of treating fractures are accurately described.

Without doubt the book meets a definite want, and should be of the greatest service to general practitioners.

H. C. S.

THE NATURE OF RICKETTSIA MELOPHAGI.

To the Editor of the "Journal of the Royal Army Medical Corps."

Sir,—In a note upon the nucleic reaction, as a test for chromatin, in this number of the Journal, I refer (p. 358) to a paper by Thiel (Arch. Protistenk, 52, 1925, p. 394), who was unable to obtain a positive result when applying this reaction to Rickettsia melophagi. According to the view I have elaborated (in this Journal, vol. 40, 1923, pp. 81, 241, and vol. 42, 1924, pp. 121, 175) of the non-living nature of these bodies, this negative result is what I should have expected. I would like to take this opportunity of briefly replying to a point Thiel makes in criticism of my derivation of R. melophagi principally from the metachromatic granules formed in the cytoplasm of the degenerating crithidiae. Thiel finds that while the metachromatic granules give the so-called volutin-reaction of Meyer, the "rickettsias" do not. Further, if a preparation which has been treated for the volutin-reaction is then washed with five per cent sodium carbonate, the granules are dissolved, while the "rickettsias" are not. Hence, Thiel concludes that metachromatic granules and "rickettsias" are different things.

The author has left out of account, however, one important factor which must be borne in mind. Since the metachromatic granules are not living organisms, but products resulting from the digestion, perhaps slightly modified, of the absorbed blood (to which explanation of their origin Thiel also, in part at least, assents), when the crithidiae die and disintegrate and these granules are set free and come directly under the influence of the digestive juices of the ked, it is by no means unlikely that they undergo a further chemical change. And this further alteration in their composition may explain their different behaviour (as "rickettsias" now) towards certain reagents. As a comparable instance, I may point out that, in the case of R. pediculi, the pigment-grains themselves do not stain with Giemsa; but after their chemical change into "rickettsias," which is correlated, in my opinion, with the loss of the iron, they do stain with Giemsa (vide my second paper, referred to above).

The title of Thiel's paper is "What is Rickettsia melophagi?" The only attempt to give any positive answer to this question is the author's observation (p. 400) that, in dead and disintegrating crithidiae, the nuclear material is represented by a clump of granules which no longer give the
nuclear reaction; and his statement that, at this stage, there is very great similarity between nuclear granules and "rickettsias." That is to say, just one of the modes by which I consider "rickettsias" are produced is tentatively indicated also by Thiel.

I am, sir, etc.,

H. M. Woodcock,

Lister Institute of Preventive Medicine,

March 10, 1926.

TREATMENT OF INJURIES IN THE NEIGHBOURHOOD OF JOINTS.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

Sir,—You published an article by me in your December issue, pointing out the value of treatment directed towards the production of normal muscle about the knee-joint in cases of "chronic knees."

I now write to point out that the same treatment might very well be applied to cases of recurring dislocation of the shoulder-joint, as the reflex group inco-ordination and reflex muscle atrophy are bound to be severe in such cases.

I have only treated one such case on the above lines. An officer had dislocated one shoulder twice, and the other three or four times, he could not remember which.

When I saw him he was almost afraid to raise his hands over his head in such necessary actions as putting on his shirt, etc.

He said that he felt afraid that the joint would go out every time, and it was making him very nervous.

Treatment was directed solely to building up and educating the musculature about his shoulders, and lasted three months.

He now states (i.e., four months since treatment was discontinued) that he has forgotten about his shoulders, and again leads a normal existence, and that all the afraid feeling and nervousness have left him.

So far, so good; but it is not possible to pronounce him definitely cured after only four months’ treatment. I think, however, that the results are so far sufficiently promising to warrant my again trespassing on your columns.

I am, etc.,

G. Gelston Atkins,

Captain R.A.M.C.

Medical Inspection Room,

New Road, Woolwich.

January 28, 1926.

A MILITARY PHARMACOPEIA AND VADE-MECUM.

TO THE EDITOR OF "THE JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

Sir,—In 1910 a letter appeared in the Corps’ Journal from (the then) Major F. J. Wade-Brown, R.A.M.C., advocating the compilation of a pharmacopœia for military hospitals. The letter so well expressed a