

but up to the time of discharge from hospital on November 19 they were still quite palpable.

On this date the Lehnendorff's test was negative, and the blood-count showed: Total red cells 4,800,000; hæmoglobin 90 per cent; colour-index 0.93; total white cells 8,400; polymorphonuclears 46 per cent; lymphocytes 42 per cent; mononuclears 11 per cent; eosinophils 1 per cent.

The treatment was symptomatic.

The child was seen six weeks after discharge from hospital. She had completely recovered and all the glands had subsided. The white cell count showed a polynucleosis. No other cases occurred in the family, but two further cases are suspected in the Royal Air Force training camp in which the child lived.

I wish to thank Lieutenant-Colonel A. Hood, R.A.M.C., Commanding Military Hospital, Moascar, for permission to send these notes for publication.

AN UNERUPTED SUPERNUMERARY IMPACTED LEFT UPPER MOLAR.

By MAJOR G. W. WILL, O.B.E.,

Royal Army Medical Corps.

THIS case is reported as being out of the usual run of cases encountered either by myself, as an alienist, or by medical officers in more intimate touch with men of their units.

The man concerned was seen at the request of the Deputy Judge Advocate General, Southern Command, India, who had the Summary of Evidence for a Court Martial under consideration. The charges included a series of sexual offences.

When seen, on July 28 and 29, 1936, the man frankly admitted the offences. These concerned the sending of grossly indecent letters, literature, and pictures to women. One instance of exhibitionism, although admitted, was not the subject of a charge.

His age was 22. Service was four years; one year and four months in India. His record was good and he had been regarded as above the average in intelligence and efficiency. He appreciated his position, had good insight, and willingly co-operated in his examination.

Family history was negative. Personal history included: (a) Sleep walking as a child; (b) average school performance; (c) hasty temper at work; he left his first job in a garage because he "punched a bloke in the ear"; (d) first regular employment was as a greaser in the Southern Railway; (e) he mentioned "sunstroke" while at the seaside; (f) he said that he was hit on the head by a pendulum coupling while at work, and while still dazed, wandered along the tracks and exposed himself. This led, directly, to his leaving the service of the Railway Company, and indirectly, to his enlistment.

He admitted that he had always been interested in sexual matters, but that recently his mind had, at times, been completely obsessed by sexual thoughts. He thought this might be due to his no longer being able to have regular sexual intercourse. Native women made no appeal to him, and he spoke regretfully of Exeter as compared with Jubbulpore. He associated his obsessional periods with severe headaches, invariably commencing on the left side and always at night.

He described himself as lying in bed until the combination of headache and sexual thoughts became unbearable and he got up and wandered about. Sometimes he remembered what transpired but at other times there was no memory for the events of the night.

He said that he remembered all the things with which he was charged, there were others which were not mentioned, and, probably, still others which he had forgotten.

He said, "I did not do them every time I had a headache but I never did them unless I had a headache."

Physical examination was at first completely negative except that, as is the case with so many men of his age in India, he seemed to have "out-grown his strength." The urine was normal. A blood Wassermann reaction and Kahn test were subsequently negative. When the routine X-ray of the skull was taken it was found that he had an unerupted supernumerary impacted left upper molar. This gave a possible, if not probable, organic cause for his headaches.

I reported to the D.J.A.G. that the man was fit to plead and that the question of his mental state at the time of committing the acts in question could be decided by the Court after hearing medical evidence, but that I considered invaliding preferable to disciplinary action.

The Court Martial proceedings were dropped and the man was transferred to the Mental Section at Colaba.

After further X-rays the third molar was extracted by Captain F. J. McCarthy, Army Dental Corps. This, it was hoped, would allow the supernumerary freedom to erupt.

A fortnight later the patient expressed himself as much improved and free from headaches; so he was transferred to the medical ward where he remained until he was evacuated to England late in December.

During this period his behaviour with the Sisters and Parsi V.A.D.s was in every way normal. He slept well, said he was no longer troubled by sexual thoughts, and expressed himself as very grateful for the treatment which had freed him from headaches.

When posted to Netley in February, 1937, I found him again under my care. He was bright and cheerful appearing in every way normal. He said, "I feel perfectly all right now and have had no more trouble."

An X-ray taken by Lieutenant-Colonel O. J. Blaikie, R.A.M.C., showed: "The supernumerary tooth has moved forwards into the space previously occupied by the roots of 18. It has also descended slightly but is not yet erupted."

The chief moral of this story seems to be, "Never neglect any part of routine examination." I have always been impressed by the "fourteen points" of one of my most esteemed colleagues.

I suggest that here we had an example of a conditioned reflex and that the removal of the stimulus put out of action a series of complicated reflex arcs whose final activities were made manifest in the form of obsessions and fugues. Activity in the conscious levels gave rise to obsessional thoughts while a similar mechanism in the unconscious levels caused fugues. There must have been an underlying tendency for his thoughts to assume a sexual form—the paths most frequently used being the easiest to follow.

Application of the censor would have resulted in psycho-neurotic phenomena as exemplified by the production of anxiety neurosis following the stimulus of such toxins as those of dysentery. (In the consideration of psycho-neurotic cases all too often the practical work of Pavlov on conditioned reflexes is neglected and too great attention paid to Freudian theories which can, at best, be taken as explaining phenomena which have organic causes.)

This case is, further, an example of the interesting co-operation between the Legal and Medical branches of the Service.

My thanks are due to Lieutenant-Colonel W. T. Fletcher, the D.J.A.G., Southern Command, India, who referred the case; to Lieutenant-Colonel A. D. Stirling, D.S.O., R.A.M.C., for his assistance at Jubbulpore; to Assistant Surgeon Heathcote, I.M.D., who took the original X-ray; to Captain F. J. McCarthy, A.D.C.; and to Colonel G. F. Rudkin, D.S.O., for permission to send this case for publication.

Echoes of the Past.

WAR EXPERIENCES OF A TERRITORIAL MEDICAL OFFICER.

BY MAJOR-GENERAL SIR RICHARD LUCE, K.C.M.G., C.B., M.B., F.R.C.S.

(Continued from page 354.)

CHAPTER XXIII.—MALARIA CAMPAIGN.

The other great work for medical administration during the summer of 1918 was the fight against malaria. This fight was entered upon with our eyes fully open. Palestine was well known to be an intensely malarial country. When it became so we do not know. There is little in the Bible to show that the inhabitants in those days suffered from malaria. There are good descriptions of many diseases, both contagious and epidemic, but no hint of the annually recurring, energy sapping one now so universal, which makes some parts of the country almost uninhabitable in the summer and autumn months, and which by its ravages undermines the