

and highly satisfactory results. Some cases were very toxæmic on admission. On the second day of treatment the patients generally felt better and rapid cure followed. The general line of treatment followed here is Dagenan 2 tablets, *t.d.*, for adult and children proportionately; with free alkaline *cum* glucose drink. Bael Sherbet in the early morning was supplied, as this is noted to turn the stools formed early. A dose or two of Dover's powder were needed for the bad cases.

S. C. GUHA ROY, L.M.F.,
Assistant Medical Officer,
Borbheel Tea Co., Ltd.,
Borgang P. O., Assam.

4th April, 1942.

THE ASSESSMENT OF VITAMIN NUTRITION

SIR.—In his article on 'The Assessment of Vitamin Nutrition' published in the *Indian Medical Gazette* of March 1922, Dr. N. C. Datta writes (line 10, p. 157, column 1), 'They found the daily excretion of most of the normal individuals whom they examined to lie between 150 to 240 mg. Westenbrink and Goudsmit (1938) are of opinion that individuals excreting over 100 mg. of vitamin B₁ are saturated with the vitamin' (italics mine).

I am surprised to read this statement and should be interested to learn the diet that these normal people consumed. So far as I know, no dietary in the world supplies such large amounts of vitamin B₁ and even the most liberal standard of the human requirements of this vitamin lies somewhere between 2 to 3 mg. Obviously, what is meant is international units and not milligrams in the above statement. But the error does not appear to be a misprint or a mere slip of pen, for, in column 2 line 20, we read, '... a value of 4.5 mg. per 100 c.cm. or less for human blood is considered to be significantly low' (italics mine).

Even at best, this is a careless statement and I should not have thus protested but for the fact that similar errors had also crept in Sir R. N. Chopra's article which appeared in the February number.

K. A. SHAH, M.B., B.S.

RANCHHODLAL DISPENSARY,
PANCHKUWA, AHMEDABAD,
28th April, 1942.

TRICHLOROETHYLENE

SIR.—I am made to understand by medical colleague of mine that trichlorethylene is as useful if not more pleasant as tetrachlorethylene or carbon tetrachloride. But no suggestion of such drug is being seen in your editorial of March 1942.

I shall be pleased if you will kindly reply me whether 'trichlorethylene' is advocated in the latest edition of Manson-Bahr.

C. MATHAI.

KADAMANKULAM ESTATE,
MUNDAKAYAM P. O.,
S. INDIA,
18th April, 1942.

[Note.—Trichlorethylene is used in industry as a fat solvent and numerous cases of intoxication have been reported from workers exposed to the vapours of this compound. Cases of acute poisoning have been reported in men using trichlorethylene to remove grease from machinery.

Animal experiments with this compound have shown that it has very little action against hookworms (Wright, W. W., 1932, *Amer. Journ. Hyg.*, 16, 2, 325).

Probably this letter refers to the editorial of March 1941 in which hookworm infection was discussed, and not to that of March 1942 which was on industrial hygiene. Was our correspondent's mistake an inspired

one, because trichlorethylene appears to be more important from an industrial hygiene point of view than from an anthelmintic?

This drug is advocated in the last edition of Manson's *Tropical Medicine*.—EDITOR, I. M. G.]

KNOWLEDGE OF SEX

SIR.—The comments on the sociological importance of sexual knowledge of Indians by Lieut.-Colonel O. Berkeley-Hill, I.M.S. (Retd.), in his article 'A Case of Mild Hypopituitarism' appearing in March 1942 number of the *Indian Medical Gazette* have neither been based on facts nor fairly drawn. It appears obvious that the author has tabooed Indians unjustly.

Although he has not given out what is the importance of sexual knowledge but it is true that procreation is the chief object and that its natural instinct common to mankind, irrespective of colour, creed and climate. It is the primitive quality of mankind, none having monopoly over it, unaffected hitherto by any sort of influence from any quarter.

India's population, according to last several censuses, has shown continuous increase. In spite of anxiety of the author, Indians are not dissatisfied with their ideals of plain living and high thinking. Would it be too much to expect that authors will save the trouble of making needless comments on racial knowledge of sex when they can easily do without those.

K. DUTT,
Honorary Secretary,
2A-Parganas Branch,
All-India Medical Licentiate's
Association.

9-B, ROYPARA BYE LANE,
COSSIPORE,
CALCUTTA,
24th April, 1942.

Service Notes

APPOINTMENTS AND TRANSFERS

LIEUTENANT-COLONEL G. H. MAHONY, I.M.S. (retired), is temporarily appointed as Civil Surgeon, Darjeeling, for a period of 1 year, with effect from the 3rd February, 1942.

His Excellency the Governor of Bengal is pleased to appoint Lieutenant-Colonel G. H. Mahony, I.M.S. (retired), Civil Surgeon, Darjeeling, as Honorary Surgeon to His Excellency at Darjeeling, with effect from the 3rd February, 1942.

On reversion to military duty of Lieutenant-Colonel V. R. Mirajkar, O.B.E., Professor of Surgery, and Principal, K. E. Medical College, Lahore, Lieutenant-Colonel S. N. Hayes, Professor of Midwifery, assumed collateral charge of the office of Principal of the College on the afternoon of the 15th April, 1942, and Lieutenant-Colonel A. S. Fry, Professor of Operative Surgery, assumed charge of the office of Professor of Surgery in addition to his own duties on the hour and date mentioned above.

On return from leave Major F. R. W. K. Allen resumed charge of the office of Civil Surgeon, Raipur.

INDIAN LAND FORCES

(Emergency Commissions)

The undermentioned Lieutenants (on probation) are confirmed in their rank, with effect from the dates specified:—

M. Alam. Dated 1st August, 1940.

S. K. Ghosh. Dated 2nd December, 1940.

A. R. Biswas. Dated 25th March, 1941.