boarding in anything other than a flat calm, and will greatly reduce this risk.

In the days of Captain Bligh it was necessary to row or sail to safety. In these days the less distance travelled the sooner one is likely to be found by the multitude of ships and aircraft that can quickly be expected at the scene of a disaster at sea.

I would like to suggest that the sooner conventional lifeboats are replaced by inflatable rafts in ocean-going ships the better for the safety of those travelling in them.—I am, etc.,

M. F. HAWKINS.

Ministry of Aviation,
Aeroplane and Armament
Experimental Establishment,
Salisbury, Wilts.

Chlorpropamide Dosage

SIR,—In your issue of 15 January (p. 148) Dr. Geoffrey L. Tullett reports the death of a patient who had taken chlorpropamide for diabetes mellitus. The maximum dose of chlorpropamide (Diabinese) that *M.I.M.S.*¹ recommends is 375 mg. daily. I note that this patient took 1,000 mg. a day at one time.

The concentration of chlorpropamide in the blood continues to rise for five days. A plateau is then established because the rate of excretion through the kidneys equals the rate of absorption. Therefore the dose of the drug should not usually be increased more frequently than every five days. However, this memorandum says that the dose was increased from 500 to 1,000 mg. after only three days.

The half-life of chlorpropamide is 35 hours. Accordingly, chlorpropamide need be given only once daily. This patient took the drug in divided doses.

It is very important to begin with a small dose of chlorpropamide, just as we begin with a small dose of insulin.^{2,3} If necessary, the dose may be increased every five days. In some patients one must reduce the maintenance dose again later, just as one must frequently reduce the dose of insulin after a while. I usually begin now with 50 mg. daily. However, this patient was started on 500 mg. a day.—I am, etc.,

BARTHOLOMEW JAMES O'DRISCOLL.
University College, Galway.

REFERENCES

- ¹ *M.I.M.S.*, Irish Edition, 1965, 5, 12.
- ² O'Driscoll, B. J., *Lancet*, 1958, 2, 749.
- ³ ——— *J. Irish med. Ass.*, 1958, 43, 323.

Skin Disease from Photographic Colour Developers

SIR,—Your leader (25 December, p. 1503) suggests that "dermatitis" due to the use of certain colour developers is a recently discovered hazard, and amateur photographers may be unaware of it.

That is not quite correct. Photographers have always been aware of the danger of metal poisoning (monoethylparamidophenol sulphate). Ferrania print a warning in their instructions for colour developers, and Kodak do so on the outside of their developer packs.

I inquired when these dangers were first known, and Dr. Wrathall Rowe, of the medical department of Kodak, tells me that metal dermatitis was known about 1880, and though colour developer dermatitis

was known about 1935 no warning was given to the public because colour film was only factory processed at the time.

Dr. Wrathall Rowe states: "It is only since the American anti-monopoly laws came into operation and obliged the company to make available to the general public other forms of colour photography that the public, as customers, have been at risk by reason of being able to carry out developing operations themselves. Colour processing kits were on sale in America somewhere about 1955, and warning notices would undoubtedly have been attached to the cartons containing the chemicals liable to cause dermatitis. Similar kits have been on sale in this country since about 1959 and we have followed the practice of our parent company in issuing warning notices with them."

It would appear that the condition occurs only in those sensitive to the chemicals, for I make a practice of wiping my hands over each print during development, and after more than 40 years have never had anything more than slightly stained finger-nails.—I am, etc.,

Guernsey.

FRANK R. NEUBERT.

One Year's Advertisements

SIR,—When as a scientist turned businessman I read in your columns from time to time letters such as that of Dr. J. C. Barker (29 January, p. 297) I sometimes wonder whether as a community we have yet fully appreciated the significance of Caxton's introduction of the printing press into this country as a means of facilitating and cheapening communication between us.

If one multiplies anything by a thousand (to say nothing of the 90,000 that Dr. Barker cites) it becomes bigger. My wife frequently reminds me that I only have to overeat to the extent of putting on 10 g. of weight a day to gain about 7 st. in the next decade—that is, to put on 36,500 g. in 3,650 days.

But do figures in this way really mean very much? Dr. Barker's 28 lb. of advertising material in 12 months could equally precisely be specified as a little over 1 oz. a day. Is that in fact very terrible?

I have not yet retained all the advertising material reaching me every morning for 12 months, but I have checked it for a normal working week. As the managing director of a medium-sized company I received at my home and my office 39 circulars—a rate in round figures of 2,000 per annum. What then is so terrible about the receipt of 301 circulars per annum that makes it worthy of note in your columns? Admittedly, I am a businessman and Dr. Barker practises a profession. Some of the circulars reaching Dr. Barker are cast in a form which displeases him. I can say the same.

But I find myself very capable of consigning rapidly to the waste-paper basket those which evoke either my displeasure or which a cursory glance tells me can hold no possible practical interest, either for myself or for one of my staff.

Having done this I find that I am invariably left with a residuum dealing with matters upon which I would either wish to be better informed myself or—more certainly—wish that my staff were; a pencilled note in the corner redirects the missive accordingly.

I hold no brief for those who produce tasteless, uninformative, or misleading circulars, whether relating to medicine or anything else. But the few seconds which it takes me to dispose of these are amply compensated for and sometimes richly rewarded by the useful information which comes to me—thanks to Caxton—so conveniently and with such economy of my time, from the others.

Is there not a case, Sir, for a little more tolerance and—if I dare say it—a slightly different sense of proportion in dealing with what are obviously, to some of us at least, among the very minor burdens of life?—I am, etc.,

H. C. H. GRAVES,
Chairman and Managing Director,
Vitamins Ltd.

London W.6.

SIR,—The letter from Dr. J. C. Barker (29 January, p. 297) has brought home to us how uneven is the bombardment of circulars which he mentions. We are astonished that he has received so few of these from drug firms. The Annual Report of the Association of the British Pharmaceutical Industry (1965) states that general practitioners receive about seven circulars a day. We have found that, including unsolicited samples and free magazines, the mail of one general practitioner contained 173 communications from drug firms in October 1965 and 208 in November 1965. The weight of the October circulars was 13 lb. 10 oz. and the postage cost £2 0s. 9d. The figures for November are 17 lb. 6 oz. and £2 12s. 8d. These postages exclude 14 items posted outside the British Isles.

Dr. Barker realized that his mail from the drug firms was probably considerably less than that of the average general practitioner. The difference is so very great that his calculations of the annual tonnage of such mail are extremely inaccurate. Our figures would suggest that general practitioners alone might receive much more than he calculated for the whole profession—perhaps 1,500 tons with postal costs of near half a million pounds in the year. Such crude calculations, however, are of little value. They would be valid only if the number of circulars remained constant in number and weight each month and if all general practitioners (a small number have removed their names from the mailing lists) received the same quantity.

More useful figures are in the report we have mentioned. The advertising costs of the pharmaceutical industry in 1963 are quoted as:

Medical journal advertising	£1.3 million
Information mailed to doctors	
Samples	£2.0 million
Medical representatives	£0.8 million
Other marketing activities	£4.0 million
	£0.9 million

—We are, etc.,

ALLEN T. WILSON.
GERARD HOOPER.

Innerleithen, Peebles.

Acne and Tetracycline

SIR,—Dr. P. B. Haribhakti (29 January, p. 297) states that "it is now well known that most patients with acne, whether pustular or otherwise, show sterile cultures on repeated examinations."