Speransky also noticed that after "pompae" there was sometimes a dissociation of the rheumatic fever syndrome: sometimes the temperature fell but the joints remained swollen for some days; or alternatively the pyrexia was maintained for some days but the swelling and pain in the joints rapidly disappeared. He argued from his study of trophic disorders that the rheumatic process was a specific nervous dystrophy, and that it was not necessarily the increased accessibility of the salicylates provided by the pumping that was remedial, but that the pumping itself was a nervous "stimulus" that provoked a new set of reactions in the nervous system which could abolish the pattern set up by the rheumatic process. Pumping, therefore, is a non-specific method of interference, and Speransky's team claimed good results in typhus and malaria. But Speransky gives the warning that pumping is a trauma of the nervous system, and if it is not followed by a reaction specifically useful it will inevitably make the position worse.

The Gillmans are to be congratulated on their enterprise in clinically confirming the results claimed by the Russian workers.—I am, etc.,

Bristol.

FRANK BODMAN.

Iodine and Failing Lactation

SIR,—With reference to the article by Dr. Margaret Robinson on "Iodine and Failing Lactation" (July 26, p. 126), you may be interested to hear that my late respected kinsman William Bennett, of Otley, was 70 years ago prescribing iodine for the last three months of pregnancy and the first three months of the puerperium as a routine measure. His instructions were: "Take two drops of Lugol's iodine (freshly made) upon a lump of sugar dissolved in milk each morning throughout the 7th month; four drops in the 8th month; and six drops in the 9th month; repeat the six drops for the next three months." He insisted that the increase of dosage should be made when the moon was at full. For the pernicious vomiting of pregnancy he gave tinct. iodi mitis, 2 min. (0.12 ml.), in aired water, fasting.

When busily engaged in practice he attended a maximum of 280 confinements per annum. He was in active practice over 32 years, and in the extreme of age I have frequently heard him state that where his instructions had been followed no mother was without milk and no vomiting was uncontrolled. I personally have followed his treatment with similar results for the last 25 years. It is interesting to have specialist if not consultant approval, albeit belatedly, for this treatment. Has any work been done upon the connexion between pernicious vomiting, failure of lactation, and "pinning areas for cattle and sheep"?—I am, etc.,

Leeds.

JAMES E. OUTHWAITE.

Standard of Nursing in the U.K.

SIR,—The letter from the Registrar of the General Nursing Council for England and Wales (July 26, p. 149) deals with a matter which is always of importance but perhaps especially so at the present time, when the shortage of nurses is being so severely felt by all classes of hospitals and allied institutions. The Registrar refers to the fact that the G.N.C. is being pressed from certain quarters to a lowering of its standards of training, and points to the fact that nursing education standards here would already appear to be falling below those in the Dominions.

Is it permissible to suggest that the pressure on the G.N.C. comes from experienced and responsible sources, and that those responsible for British nursing standards would be well advised to pay heed to it rather than to raise further the standards of theoretical nursing education in this country?—I am, etc.,

Inverness.

T. C. MACKENZIE.

Report of B.M.A. Film Committee

SIR,—It is distressing that the Report of the B.M.A. Film Committee (Appendix II, Supplementary Report of Council, *Supplement*, June 21, p. 140) should have evoked neither appreciative nor critical comment in your columns. I must confess that, not being an avid reader of the *Supplement*, the Report at first escaped my attention, and with this in view one must earnestly hope that its relegation to the last few pages of the *Journal* did not impede its potential circulation. Further, its

length is of such proportion as might engender timidity on the part of a non-technical reader. Patient reading, however, dispels this notion, and student and teacher alike will find it of interest if not of value also. Surely the committee is to be commended on the publication of this document, for though many fragments of it have appeared before and separately, the collation of such material at a time when medical schools are still busy endeavouring to formulate their own ideas on the subject must be beset with difficulties.

The inclusion of a short section on the film strip (paras. 26-33) is indeed interesting and encouraging, though by virtue of loose definitions and important omissions this part of the Report lacks the necessary conviction. For instance, no mention is made of the fact that such strips are customarily prepared on non-inflammable film of 35-mm. gauge and that (at present) two frame sizes are available. Reference to one of the more important features of film strip has only been made in the most nebulous manner: it should be understood that the scripting and construction of a first-class strip is not at all unlike that of a motion picture. Hence, in the many cases where the demonstration of movement is non-essential, the former medium may be used with even greater efficiency than the latter and at a fraction of the production cost. Points concerning the production of recapitulatory film strips from selected frames of motion pictures need not be laboured here, but a section of film strip should not be complete without some allusion to the miniature lantern slide, without which there is a danger of imposing an unnecessary limitation on the versatility of the medium as a whole.

No doubt the above points would have been covered by a more complete survey, but as, in the words of the Report (para. 31), "Films and film strips are probably the most closely related visual aids . . ." it seems important that a clear conception of the inter-relationships involved should be presented. Together with the Scientific Film Association's Film List this Report must form a valuable guide to present trends, and should stimulate those of us who are even remotely connected with the preparation and use of visual aids.—I am, etc.,

Department of Medical Photography,
Westminster Hospital.

PETER HANSELL.

POINTS FROM LETTERS

Request from Finland

Dr. F. CHOWN (Penzance, Cornwall) writes: I have received a letter from a Finnish doctor—Dr. Reino Lagus, Pettosalmi—to say that he is likely to attend the International Congress for Mental Health, to be held in London in August, 1948, and in order to solve the difficulty of getting foreign currency he is willing to receive an English doctor, or member of his family, as a guest in his house for a month either this summer or at the beginning of next summer, if he in exchange will help Dr. Lagus in his stay in England. Dr. Lagus speaks English. The address is: Dr. R. Lagus, Arhadia, 31, A 23, Helsinki, L., Finland.

Warmth and Colour

Prof. W. BURRIDGE (Oxford) writes: . . . I have to suggest . . . that no explanation of colour vision can be held satisfactory if it neglects the artists. They are the scientists of colour sensing, and we should grant them the credit of being as correct in their judgments as we are in our own. That is to say, a satisfactory colour vision theory must make automatic provision for a division of colours into the warm, cold, and neutral as well as for yellow to be perceived as warmer than red. Up to the present, however, the physiologists and psychologists have assumed that the artists have made an awful mistake in sensing yellow as warmer than red. They have consequently framed theories to accord with the assumption that the artists are wrong. But if the artists were right there must be something fundamentally wrong with the assumption. It is also agreed among writers of textbooks on vision that no satisfactory explanation was known to them of the production of colours by Benham's top. This question was taken up in India by Dr. Naidu, of Annamalai University. He found a very simple explanation of the production of colours by Benham's top. In fact, by accepting a different basis for the fundamental action of light on the eye, colour production by Benham's top became a predictable phenomenon. Colour production by Benham's top accords with the artists' division of colours as well as with the sensing of greater warmth in yellow than in red.