that the presence of upper abdominal hyperaesthesia in an Army dyspeptic is sufficient to warrant hospital investigation.

Summary

Abdominal hyperaesthesia has been tested in 30 Army dyspeptics suspected of peptic ulceration.

Its presence has coincided considerably with abnormal radiological findings.

It is claimed that such a test may give R.A.M.C. officers in charge of troops some clear indication of which dyspeptic cases will require hospital investigation and which may be retained with the unit.

THE INCIDENCE OF SCABIES AND ITS APPARENT DEPENDENCE UPON SUBNORMAL INTELLIGENCE

BY

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Scabies constituted the greatest single cause of incapacity among troops stationed in 1915 in the United Kingdom (*Official History of the Great War*, 1931). It was noted that from 1916 to 1920 the ratio of cases occurring in France to those in the United Kingdom was about 20:18, the observation suggesting that the insanitary conditions of trench warfare were less important as an aetiological factor than is commonly supposed. Recent clinical experience suggested that the man who is most likely to contract scabies is the "dullard" or the mental defective.

Accordingly a preliminary sample of 100 unselected scabietic patients has been examined to assess their intelligence. The results have been compared with those obtained in a control sample of 500 consecutive recruits at a R.A.M.C. depot tested in the same manner. The test employed was the R.E.C.I. progressive matrices (Penrose and Raven, 1936; Raven, 1939), the sets A, B, and C being used, as these give a high degree of differentiation between individuals of average and those of below average intelligence. The validity of each score was confirmed by comparing the marks in each set with the expected "break-up"—i.e., distribution of marks between the three sets. With a possible total score of 36, the middle 50% of the scores in the control group fell between 27 and 32 inclusive, the median being 30; and these scores were considered "average." The 5% scoring 19 or less were termed "very inferior," the 26% scoring between 33 and 36 "above average." The same score standards were adopted in grouping the scabietic patients, of whom only 14% scored above the median of the control group. The table shows the comparison between the groups.

Marks	Control	Scabies	Group
0-19	5%	27%	"Very inferior"
20-26	19%	42%	"Below average"
27-32	50%	28%	"Average"
33-36	26%	3%	"Above average"

Thus it is seen that the scores of 27% of the scabietic patients lie in the "very inferior" group—i.e., low enough to warrant the suspicion of mental defect; while those of another 42% fall below the "average" range; only 3% achieved "above average" scores. The differences are shown diagrammatically below.

Although the investigation of a comparatively small series is inconclusive, the results suggest a close correlation between the incidence of scabies and that of subnormal or defective intelligence.

Discussion

Scabies prophylaxis in the Army includes regular bathing, avoidance of overcrowding in billets, disinfection of blankets, clothing, and latrines, the inspection of troops, and the treatment of developed cases in isolation. Nevertheless, the high incidence continues. Some cases undoubtedly come from propinquity or from infection acquired at home whilst on leave. Personal uncleanness predisposes to infection, and a large number of scabietic patients have dirty clothes, dirty skins, and dirty habits. At home stations the majority of troops are within reach of normal sanitary amenities, but some men remain dirty however good the facilities and however strict the discipline. These men are usually of much below average intelligence. Such men may well form a nidus, infecting from time to time their more intelligent fellows. To rid the Army of the mentally defective would go a long way toward ridding it of scabies.

This inquiry is continuing on a larger scale, and venereal disease, pediculosis, and other cutaneous diseases are being investigated similarly.

Summary

100 unselected scabies patients and a control group of 500 consecutive recruits have been submitted to an

intelligence test. Scores suggesting subnormal and low-grade intelligence were found in great excess among the scabietic patients.

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J. D. Rolleston (*Clin. J.*, 1940, **69**, 321), who emphasizes the rarity of laryngeal diphtheria in adults, has collected twelve cases in adults aged from 22 to 76, including one of his own in a woman aged 76. Five were in men and seven in women. In five the larynx only was affected, in six the fauces as well, and in one no details were given. Intubation was performed in two, tracheotomy in one, laryngotomy and tracheotomy in one, intubation and tracheotomy in one, and no operation in seven. In five the laryngeal symptoms were confined to loss of voice and a croupy cough, which helps to explain the unusually low mortality in the present series. The death of George Washington at the age of 67—which has been variously attributed to laryngeal diphtheria, Vincent's angina, Ludwig's angina, tuberculosis, pneumonia, and cancer—was most probably due to septic sore throat.