

Correspondence

DILUTE IODINE LOTION IN ACNE

To the Editor:

REMEMBERING the high dilution in which iodine has been found efficient as an antiseptic, it occurred to me that a dilute solution which would not stain the skin, and which could be applied daily without irritation, might be serviceable in the various pustular eruptions such as acne, eczema oris, etc., which are so disfiguring to the faces of those that suffer from them. The results in the limited number of cases in which I have had an opportunity of trying the treatment have been so gratifying that I feel justified in reporting the matter..

I use *Tr. Iodi Mitis* B.P. one drachm to 8 ounces of water as a lotion at night, or in some cases night and morning. Fresh solution should be made up every week, as the iodine volatilizes fairly rapidly. The treatment must be continued indefinitely, but patients are so rewarded by the marked improvement in their appearance, that they are glad to continue.

Within a few days after commencing the treatment, formation of pustules is retarded, the induration and redness surrounding the more disfiguring lesions begins to lessen, and many of the smaller lesions disappear altogether. Few fresh ones appear, and those which do are less extensive and more transient than formerly. The inflammatory reaction surrounding a few of the more acute lesions may be slightly aggravated by the first few applications, in which case the patient is advised to avoid these areas for a few days until the acute process subsides.

One patient, a case of eczema oris, had been treated at various times with the following; eucalyptol ointment, Fordyce's paste, sulphur ointment, autogenous vaccine of staphylococcus albus, 95% alcohol as a lotion, ether as a lotion, and ammoniated mercury, (grs. x to the ounce benzoated lard). All these methods except two either failed completely or aggravated the condition. Ammoniated mercury ointment proved of benefit in controlling the eruption to some extent, but its effect was neither as great nor as constant as the iodine solution. Neither was

it as convenient or pleasant an application. Ethyl alcohol 95% was of as much, if not more, benefit than the mercury. This patient is still using the iodine lotion and seldom does a papule appear, and those which do are faint and inconspicuous. Neglect of treatment, however, when away from home, and use of old solution under strength have on some occasions resulted in recurrences of greater or less severity.

One patient, an extreme case of acne, was so much improved after a week's treatment, that one of his associates remarked to me, "He used to have acne very bad."

Beachville, Ont. E. N. BALLANTYNE, M.D.

SERUM TREATMENT OF GLANDERS

To the Editor: During the early part of 1922 there was a serious outbreak of glanders among the horses at Treesbank, Manitoba, and a young farmer who had several of his animals affected, contracted the disease. He was brought to Winnipeg, and Dr. A. Gibson had him under his care for several months at the Galloway-Gibson clinic, where he was vigorously treated without any very appreciable effect. In the early part of December, while discussing the case with Dr. Torrance, Dr. Watson, Dr. Heath and Dr. Gallivan, at the Biological Laboratory, Health of Animals Branch, at Ottawa, they told me they had a horse that they were endeavouring to immunize by the repeated injection of mallein and that if we had the courage to try its serum on a human being they were willing to supply it practically *ad lib*. I brought home a considerable quantity and Dr. Gibson readily assented to its being tried out. To be brief, the results were simply amazing. This young man had a suppurating sinus running from below the knee to the ankle, and six shorter ones radiating from this region and riddling the foot and lower part of the leg, besides a large ulcer, one and a half inches in diameter about the internal malleolus. Indeed, so grave was his condition that amputation above the knee was seriously considered.

After four or five injections of the serum the

sores had ceased to suppurate and in less than three weeks were completely healed and the man is now about his work as usual.

In the meantime the young doctor who was attending the case had accidentally infected himself and came to Winnipeg with an angry sore one inch in length and three-quarters of an inch in width on the upper part of the dorsal surface of the right forefinger. The edges were undermined and on the slightest movement of the finger pus exuded everywhere from the floor. It was steadily progressing in spite of the application of iodine and other antiseptics and the *Bacillus Mallei* was found in pure condition in the discharge.

After three injections of the serum it assumed the appearance of a clean sore in which the bacillus could not be found either by culture or smear.

and which went on and healed in the most kindly fashion until, in less than two weeks, the skin was again quite intact.

Dr. Gibson and Dr. Jackson will make a full report on these cases at an early date but in view of the possibility that there may be other sufferers from this infection I thought it right to ask you to publish this preliminary note.

There is perhaps no chronic infection that has such a gruesome and distressing clinical course as glanders and any new and better method of treatment will prove a boon. Any physician having the opportunity and wishing to try this serum can count, I am sure, on the eager co-operation of Dr. Torrance's Department.—GORDON BELL, M.D., C.M., *Professor of Bacteriology and Hygiene, University of Manitoba.*
Winnipeg, January 31st, 1923.

The Editor,

Canadian Medical Journal, Montreal.

Dear Sir:

Are the members of the Canadian Medical Association aware of the fact that it is the intention of the Government of Canada to charge duty on books on medicine and surgery, and on reprints of articles written by Canadian physicians and surgeons for free distribution amongst their colleagues in Canada. Article 172 of the Customs Tariff, "provides for the free entry of books on mechanic arts and similar industrial books, but it does not provide for the entry of books on medicine and surgery." "Non-advertising printed books on medicine or surgery. . are subject to duty under tariff item 171 at the rate of ten per cent. ad valorem, general tariff, plus the sales tax, when imported by individuals, unless they are included and used as text books in the curriculum of a university, college or school in Canada."

Under past governments reprints of articles written by medical men for free distribution amongst their colleagues were admitted into this country freely and without custom duty. It is noted that this, apparently, is not to be the practice under the present regime. This is

regrettable, because a customs duty imposed on educational books or reprints can act only to the detriment of the Canadian people and is very definitely opposed to the spirit of the law. Past governments have lived up to the *spirit* of the law, whereas it is feared that the present government can only be expected to uphold the *letter* of the law. The reason for this change in practice by the Department of Customs is not a question of politics, but the Canadian Government is harassed by an ever-increasing debt which forces them to bleed the Canadian people in an endeavour to make ends meet. The burden of this debt under which Canada labours is equally due to Conservative and Liberal Governments alike. While medical men will sympathize with all legitimate efforts made to provide revenue to meet our country's obligations the medical profession of Canada should unite to see that our Governments are not permitted to increase their revenues at the expense of the advancement of science and especially that science which stands for the healing of the nation. Yours faithfully,
December 21st, 1922. A. MACKENZIE FORBES

N.B. The words in italics in this letter are quotations from letters written by the Minister of Customs.