

ou 160/100 qui lâche facilement avec le repos et la détente.

Il existe enfin un syndrome bien défini: le syndrome d'effort. Celui-ci se présente sous forme de crises survenant sur un fond d'angoisse et d'anxiété. La crise est subite, survient au moindre effort, à la moindre émotion, se caractérise par un malaise thoracique, des palpitations, de la dyspnée, de la céphalée, une faiblesse particulière dans les jambes. Il sait ce qui se passe autour de lui mais il ne peut bouger. Au bout de quelques minutes il revient à lui et se remet lentement. Les crises se répètent tous les jours ou tous les mois et peuvent handicapper complètement la vie d'un individu. Ces crises sont beaucoup plus d'origine neuro-psychique que cardiaque. Le traitement consiste surtout en psychothérapie, d'après Hurst, et en médicaments anti-spasmodiques (bromures, barbituriques). Plusieurs de ces malades peuvent récupérer et rentrer dans les rangs. Les autres doivent être renvoyés.

Le Capt. L. Lamoureux donna quelques considérations sur l'anesthésie régionale dite caudale.

Le Capt. C. Roy parla pendant quelques minutes sur les gaz de guerre.

Le Capt. Boulanger soumit quelques expériences diététiques en rapport avec l'emploi de divers genres de rations pour les gens de l'armée.

T. BOULANGER, CAPT.,
Le Secrétaire.

Correspondence

Welfare of Laboratory Animals

To the Editor:

As a result of recent correspondence with a number of workers engaged in experiments on animals, we have become aware that there is a strong and widespread desire for experience to be pooled so as to enable the maximum of consideration to be shown for the feelings of laboratory animals. With the view of helping to give effect to this desire we have supplied to 130 laboratories, on request, a copy of the recent book by Professor J. G. Wright, F.R.C.V.S., entitled *Veterinary Anæsthesia*.

At the suggestion of a number of research workers we are proposing further to compile

information relating to (1) anæsthesia of rats, rabbits, guinea-pigs and other animals not covered by Professor Wright's book; (2) methods of killing laboratory animals; (3) living conditions, housing, diet, etc., and to invite a small number of experienced men to act as a panel for approving or amending the resulting compilation. We should be most grateful to any readers of the *Journal* who would get into touch with us with a view to communicating to us any views or suggestions that they may be able to offer.

The breeding of laboratory animals is regularly discussed among research workers, and many of them think it would be desirable to put it as far as possible into the hands of trained personnel. We consider that this plan is likely to benefit the animals, since it will offer an opportunity of bringing their living-conditions under the supervision of responsible persons whose interest is not purely mercenary.

Yours faithfully,

F. JEAN VINTER, M.D., *Secretary,*
Universities Federation for Animal Welfare.
London, Eng., May 27, 1943.

Erratum

To the Editor:

An unfortunate error crept into my report on a case of Paget's disease of bone in the July issue of the *Journal*. In referring to the work of Askanazy and of Mandle on the relation between Recklinghausen's disease of bone and the parathyroid glands the term hyperpituitism instead of hyperparathyroidism was employed. The mistake is rendered more conspicuous by my reference to G. Schmorl having appeared in "sackcloth and ashes" after making the error of considering the two diseases, Paget's and Recklinghausen's, as one and the same. May I, while apologizing for the inadvertent mistake, likewise appear in the garb of humility.

I would like to take the opportunity which this letter gives me of thanking Professor Matheson of the Anatomy Department of Queen's University for his assistance in making the dissection of the parathyroid glands in the case as well as for his help in the performance of the autopsy itself.

JAMES MILLER.

Queen's University,
Kingston, Ont.,
July 9, 1943.