

## Correspondence

### Unwise Recommendation of Acetanilid in Heart Failure

To the Editor:—After all the painstaking work done of late to enlighten the profession at large on the dangers of acetanilid et al. (THE JOURNAL, July 24, etc.), it is discouraging to me to observe that Dr. A. C. Klebs, in his otherwise valuable work on tuberculosis, just issued, lists acetanilid as a heart-stimulant under the heading, "For Tendency to Heart-Failure," p. 823. While the small dose advised might not prove dangerous, except in advanced cases, it is certainly inconsistent with our knowledge of the physiologic action of acetanilid to recommend it as a remedy to combat heart-failure in a disease in which the heart is most often seriously encumbered.

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### The Smith Operation for Cataract

To the Editor:—The paper Dr. Würdemann read at Atlantic City on "Expression of Cataract in Its Capsule" [THE JOURNAL, September 4] is misleading to the casual reader.

He quotes as follows from a paper written by Elschmig in 1908: "The lens is expelled after incision of about one-third of the circumference made with a conjunctival flap and an upward iridectomy, either by means of gentle pressure or with the flat spoon acting purely as a gliding surface." Würdemann states that "the above description of Pagenstecher's operation on cataract in the unopened capsule is as short and accurate as has yet been given. Examine these words closely, the various essays of Pagenstecher, digest them, then follow up by reading the essays of subsequent writers, as Cassiani, Gradenigo, Gayet, Landesberg, and other foreign writers, Roosa, Andrew, Henry Smith, Oxley, Maynard, Herbert, Cheney and Greene, then come back to the original of Pagenstecher and give credit for devising the operation in all its details where it belongs, not to later operators, even though of astounding skill, sufficiency and experience."

Again, "But on referring to the original author and in correspondence with German writers, I now fully agree with Elschmig (editor of Czermak's *Augenärztlichen Operationen*) in a letter to me of Feb. 1, 1909, in which he says: 'Pagenstecher's operation is quite the same as Smith's.'"

Dr. Würdemann's paper seems to have been written on the text above quoted from Elschmig's paper of 1908, and all other things made to do service for that quotation. Why does Dr. Würdemann, when enumerating papers by the Pagenstechers, not include any paper written between 1888 and 1908. In 1903 I paid a visit to Pagenstecher and his clinic at Wiesbaden and I have to thank him for his courtesy. He received me in the following terms:

"You are the most interesting man in the world to me. I have advocated extraction in the capsule for the past thirty years, but I have given it up on account of the amount of escape of vitreous. Your operation is quite different. I shall be so much obliged if you will show me how to do it." I then showed him how to do it. Again, "I should be so much obliged if you would preside over me doing it." I did so. He then said: "The best operation in the world, I will now do nothing else."



This explains the hiatus between 1888 and 1908 above noted, and explains why Pagenstecher's operation to-day is the same as Smith's. See the Pagenstecher spoon of the olden days (accompanying illustration). How could this instrument be used as an "inclined plane?" Such is impossible. It was devised to turn concave surface downward after the incision to press on the zonula at the incision and thus dislocate the lens there at least and then to turn concave surface upward to be slipped in through the opening made by thus detaching the zonula, behind the lens and to lift out the lens on it through a "third circumference incision," which means that the capsule would rupture in almost every case. This incision is not big enough, half the circumference would be barely big enough as

it has to let out both the spoon and the cataract. Even when no spoon is inserted, the man with considerable experience of the present day operation would be well advised to make his incision half or very nearly half the circumference of the sclero-cornea, if he wishes to avoid mishaps. An incision one-third of the circumference in size, as attributed to Pagenstecher is courting difficulties amounting almost to impossibilities at every step and is courting "slow healing" among other things owing to the excessive manipulation required.

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## The Public Service

### Medical Department of the Army

Changes for the week ended Sept. 4, 1909:

Porter, E. H., M. R. C., granted leave of absence for 1 month.  
Porter, E. H., M. R. C., relieved from duty at Fort Worden, Wash., to take effect on expiration of leave of absence, and will proceed to his home when he will stand relieved from active duty in the M. R. C.  
Hughes, L. S., M. R. C., relieved from duty at Ft. Lawton, Wash., and ordered to Fort Worden, Wash., for duty.  
Ford, C. S., major, ordered, on the expiration of his present leave of absence, to proceed to Fort Logan, Colo., for duty.  
Coffin, H. L., M. R. C., leave further extended two months.  
Le Wald, L. T., capt., leave of absence extended 6 days.  
Edger, B. J., Jr., major, granted 2 months' leave of absence, with permission to go beyond the sea, to take effect when discharged from treatment at the Army General Hospital, Presidio of San Francisco.  
Woolley, H. C., M. R. C., granted leave of absence for one month, with permission to apply for an extension of one month. So much of par. 18, S. O. 174, July 29, 1909, W. D., as relieves Lt. Woolley from active duty in the M. R. C. is so amended as to take effect on the expiration of his leave of absence.  
Kendall, W. P., major, granted leave of absence for one month, to take effect about Sept. 10, 1909.  
Hull, A. R., M. R. C., granted thirty days' leave of absence when his services can be spared.  
Norman, Seaton, M. R. C., ordered to active duty and assigned to Ft. Leavenworth, Kan.  
Philips, H. F., M. R. C., ordered to active duty, and assigned to Ft. Sam Houston, Tex.  
McCaw, W. D., Kean, J. R., Lt.-cols., and Ireland, M. W., major, detailed as delegates to represent the medical department of the Army at the meeting of the Association of Military Surgeons of the United States, to be held in Washington, D. C., Oct. 5 to 8, 1909.  
Wheate, J. M., M. R. C., ordered from Ft. Lincoln, N. D., to Ft. Snelling, Minn., for temporary duty.  
Ware, W. H., dent. surg., ordered to proceed to San Francisco, and on arrival, report by telegraph to the Surgeon General of the Army for annulment of contract.  
Cook, G. W., Jones, E. C., Knox, H. A., Mount, J. R., M. R. C., relieved from duty at their present stations and ordered to report on Oct. 1, 1909, to Col. Valery Havard, M. C., president, Army Medical School, at Washington, D. C., for a course of instruction in that school.

### Medical Corps of the Navy

Changes for the week ending Sept. 4, 1909.  
Wilson, H. D., surgeon, detached from the *Indiana* and granted leave for two months.

### Public Health and Marine-Hospital Service

List of changes for the seven days ended Sept. 1, 1909:  
Cofer, L. E., assistant surgeon-general, directed to proceed to Cape Charles Quarantine Station and Fisherman's Island, Va., on special temporary duty.  
Rosenau, M. J., surgeon, granted 4 months' leave of absence from Oct. 1, 1909.  
Nydegger, J. A., surgeon, granted 1 month and 7 days' leave of absence from Sept. 10, 1909.  
Sprague, E. K., surgeon, granted 1 month's leave of absence from Sept. 8, 1909.  
Wickes, H. W., P. A. surgeon, granted 15 days' leave of absence from Sept. 1, 1909.  
Cumming, Hugh S., P. A. surgeon, leave granted July 8, 1909, amended to read 1 month from Aug. 9, 1909.  
Poster, M. H., P. A. surgeon, relieved from duty at Ellis Island, N. Y., and detailed to accompany the Agent of the Immigration Board of the Territory of Hawaii to the Madeira and Azores Islands.  
Gwyn, M. K., P. A. surgeon, leave granted Aug. 17, 1909, for 7 days from Aug. 17, 1909, amended to read 5 days.  
Wille, C. W., P. A. surgeon, granted 14 days' leave from Sept. 12.  
Bogges, J. S., P. A. surgeon, relieved from duty on Revenue Cutter *Tahoma*, and directed to proceed to Chicago, and report to the Medical Officer in Command for duty and assignment.  
Stimson, A. M., P. A. surgeon, granted 7 days' leave of absence from Aug. 23, 1909.  
Sweet, E. A., P. A. surgeon, relieved from duty at Boston, Mass., and directed to proceed to Ellis Island, N. Y., and report to the Chief Medical Officer for duty.  
Wollenberg, R. A. C., asst.-surgeon, directed to proceed to Rotterdam, Holland, on special temporary duty.  
Atilles, Pedro del V., acting asst.-surgeon, leave of absence granted Aug. 4, 1909, amended to read 30 days' leave from Aug. 18, 1909, with pay, and 15 days from Sept. 17, 1909, without pay.  
Browne, R. W., acting asst.-surgeon, granted 1 day's leave of absence, Aug. 31, 1909.  
Cleaves, F. H., acting asst.-surgeon, granted 21 days' leave of absence from Sept. 13, 1909.