

Medical Matters.

MOSQUITOES AND PEAT.

Sir George Birdwood, M.D., K.C.I.E., in an interesting letter to the *Times*, fully accepts the suggestion made by a correspondent of that journal as to the repellent action of peat on mosquitoes. He writes:—

"These most annoying pests, the 'maliculices' of Horace, are nowhere more abundant than in India, where it is found that some plants attract them and some dispel them, notably the *Tulsi* or Sacred Basil (*Ocimum sanctum*), and, within my own observation, the Mexican thistle (*Argemone mexicana*). A common native means for clearing a room of them is to burn a little myrrh in it, and I always sprinkled a little tincture of myrrh on a pocket handkerchief and laid it on my pillow to keep them off me while I slept. The fumes of wormwood are also widely used in India for the expulsion of mosquitoes from the house, and in Bombay I found the wealthy Indian merchants occasionally using for this purpose a pastille, imported from China, composed of juniper sawdust and pounded wormwood, the very sight of which before it was 'incensed' seemed to strike terror into the mosquitoes. They also seemed to avoid the smoke of tobacco.

"To add a dash of gall to my ink—Why do not European scientists engaging in researches of this character invariably first refer to India to learn what is already known there in connexion with them? They are sure to find in both the literature and the folk-lore of the country invaluable suggestions (and as well in fable as in fact) for their inspiration and guidance, the accumulation of 5,000 years of patient observation and irrespressible speculation. And after India they should turn to the classical writers of Greece and Rome, the dead pages of the antiquity that still survives in India—the India of the Hindus. They are sure to find something there also that will add, at least, to the interest, if not to the practical value, of their researches. Pliny's heroic description of the 'accursed mosquitoes' is one of the most lively of his literary passages, but none ever quote it to redeem the stubborn dulness of their flavourless facts:—'In none of her works has Nature more convincingly shown her surpassing intelligence, her vast resources, and her ineffable perfection . . . than in the mosquito (gnat). . . . Where has she found room to place in it its eyes, its sense of taste, its sense of smell, and the organs of its sharp trilling voice, so utterly disproportioned to the minuteness of its body?

With what marvellous cunning has she spread its wings, and lengthened its legs, and framed that long craving concavity of a belly and inflamed it with that insatiable thirst for blood, and especially for the blood of man! Here we have not only Pliny the naturalist, but Pliny the man—who had suffered."

THE TREATMENT OF INSANITY BY SURGERY.

At one time, if a patient suffering from mental disease was incarcerated in an asylum the generally accepted view was that he was placed there more with an object of restraining him from injuring himself and others than with any great hope of his ultimate recovery. This outlook, indeed, found expression in the use of the word asylum. But it is now increasingly recognised that asylums are not only for the reception, but for the treatment, and, if possible, the cure, of the insane, that they are, in fact, great mental hospitals. It is natural, therefore, that active remedial measures should be adopted, and Dr. Charles Williams, L.S.A., formerly Resident Assistant Medical Officer at the Heigham Hall Asylum, draws attention to the relief afforded in certain cases by surgical treatment.

Pleading for "The More Energetic Treatment of the Insane," he states that "one reason of the infrequency with which surgical treatment has been resorted to is because of the difficulty of locating the exact seat of mischief in the brain; in a good many cases this can be successfully done, and even if unsuccessful, as regards cure, the danger of opening the cranial cavity, thanks to the perfection to which the science of surgery has now been brought, is so very slight that such operations are certainly quite warrantable. Indeed, such operations are, as is well known, already pretty frequently performed, as a last resort, in certain cases of epilepsy, and in some forms of paralysis." He proceeds to argue:—

"Surely, then, they are more than justifiable, as a last resort, in this worse malady still—Insanity. And especially, may I say here, do I agree with Dr. Clay Shaw and others, that in cases of delusional insanity, such a method should certainly be tried, there being many cases on record where visual and aural hallucinations, which have made their subjects miserable and kept them insane for years, have been partially or completely cured by operations performed upon that part of the brain where the centres for sight and hearing are situated."

"The Cerebral Localisation of Melancholia" with illustrative cases pointing to mischief in the parietal region of the brain, has been described by Dr. Bernard Hollander.

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