

SURGERY

New Operation Promises Conquest of Angina Pectoris

College of Surgeons Hears That Knife Can Cure Stomach Ulcers; Smoking Causes Increased Cancer

ANGINA PECTORIS, excruciatingly painful type of heart ailment which strikes down men and women in the very prime of life, may some day be conquered by the surgeon's knife.

An operation which gives hope of saving many lives threatened by this disease was demonstrated before the American College of Surgeons meeting in New York City.

The operation consists of giving the heart itself a new supply of blood. The trouble in angina pectoris is that the arteries which carry blood to the heart muscle, to enable it to pump blood to the rest of the body, become blocked.

An operation to remedy this condition has already been successfully used on human patients by Dr. Claude Beck of Cleveland. A simpler way of doing the job was demonstrated by Dr. Samuel A. Thompson of New York, at the Flower Fifth Avenue Hospital.

Dr. Thompson has not yet used the new operation on human patients, but dogs on which he performed it were well and active even if all the arteries which normally nourish the heart were blocked or tied off. Without the operation, half of the animals in this condition invariably died.

The new blood supply comes from the sac which surrounds the heart. In the operation, this tissue is made to adhere to the heart muscle, so that its blood vessels grow into the heart, carrying their blood with them. Dr. Beck has given the heart a new blood supply by the more difficult operation of attaching a piece of chest muscle.

The operation sounds like a cure for angina pectoris, but surgeons at the meeting cautioned that it is still in the trial stage.

Stomach Ulcers Cured

PATIENTS suffering from stomach or digestive tract ulcer can be permanently cured and recurrence of ulcers prevented if the surgeon cuts out two-thirds to three-fourths of the stomach, Prof. Hans Finsterer of Vienna

told members of the American College of Surgeons.

He reported 88 out of 96 patients permanently cured by this extensive operation. He finds it much safer to do the operation under local anesthetic instead of under ether or other general anesthetic.

They Get Along

Most patients get along quite well with the remaining small stomach. In a few cases anemia develops but this can be controlled by feeding liver or giving liver extracts. The complaints because of the small stomach are minor, Prof. Finsterer pointed out, compared to the dangers of a gastrojejunal ulcer.

When ulcers come back in a patient after operation, it is not because of "an unusual disposition to develop ulcers which cannot be controlled surgically," Prof. Finsterer declared. He claims recurrence of ulcers is due to failure of the surgeon to remove enough of the stomach in the first place. He described patients who had had from three to six operations without permanent cure until two-thirds of the stomach was removed.

Object of removing this large section of the stomach is to insure the lower part of the digestive tract being completely free of acid, Prof. Finsterer explained.

A short-circuiting operation, in which a new opening is made from the stomach to the lower portion of the digestive tract, is not advised by Prof. Finsterer. He says it should be done "only in rare, exceptional instances." His point is that while this short-circuiting operation reroutes food and stomach juices past the upper 10 inches of the intestines, thus protecting them from irritation, new ulcers are likely to form in the next section of intestine.

After cutting out two-thirds of the stomach, some fancy surgical needlework is required, it appeared from Prof. Finsterer's report, to attach the remaining third of the stomach to the rest of the digestive tract.



FOR GRECIAN BEAUTY
This delicate bronze mirror helped some Greek beauty of the sixth century B. C. to get her make-up on straight. Now acquired by the Metropolitan Museum of Art in New York, it is pronounced almost perfectly preserved. The crusty green of the disk was originally golden bronze, and being slightly convex it diminished the image, so that the user might see not only her face but headdress and neck as well.

Smoking Causes Cancer

MORE persons are dying of cancer of the lung than ever before, probably because more persons are smoking and inhaling tobacco smoke than ever before. This startling statement was made by Drs. Alton Ochsner and Michael De Bakey of Tulane University School of Medicine, New Orleans, at a cancer symposium at the meeting.

"The inhaled smoke, constantly repeated over a long period of time, undoubtedly is a source of irritation" to the lining of the bronchial tubes, the New Orleans surgeons gave as their opinion.

Ten to fifteen out of every 100 primary cancers, not those that have spread from other cancers elsewhere, are lung cancers, they stated. Lung cancer is found in one or two out of every 100 persons examined after death.

Persistent cough with expectoration, bloody sputum and discomfort in the chest, are the most prominent symptoms, and in any one past 40 years of age should be considered signs of cancer until proved otherwise.

The only hope of cure is to remove the entire lung and the lymph nodes in the chest. This has been done in 87 patients, eight of them operated on by the New Orleans surgeons. Of their eight patients, three survived. One is still living two and one-half years after the operation. The others were only recently operated. Of the 79 other patients, 50 died and 29 recovered.

Neon Signs For Cancer

TO CUT down cancer deaths, neon signs should be installed in every restaurant stating:

"Indigestion does not start after 40 in a man who has been able to eat everything till then."

This suggestion for fighting stomach cancer was made by Dr. W. H. Ogilvie, of London, England.

Stomach cancer, he said, is the commonest and least operable of all cancers. Its treatment by surgery has the highest death rate and the lowest cure rate.

Usually the disease has progressed too far for operation by the time the patient consults a surgeon. This is partly due to the fact that many patients have no warning beyond an indefinable loss of strength until nearly the whole stomach is cancerous. Many who come to the surgeon too late, however, have suffered from digestive discomfort for months or even a year or two, dieting and taking alkalis, before going to their physician for an overhaul. It is to warn these patients that Dr. Ogilvie suggested the neon light signs in every restaurant.

A similar but "more discreet" notice, he suggested, might be put in the office of physicians who are not surgeons. This sign would read: "Gastric ulcer does not present itself for the first time after 40." The idea is that physicians should not treat a middle aged patient for stomach ulcers until cancer has been absolutely ruled out.

There are exceptions to both warning statements, Dr. Ogilvie said, but a large number of patients can be brought "from the hopeless to the hopeful category" if these twin warning signs are heeded.

Only from five to 10 out of every 100 stomach cancer patients survive five years after operation, Dr. Ogilvie said. He believes more patients can be saved

by performing a more extensive operation than is customary now.

"Sinister features" of stomach cancer are its wide and early spread through the lymphatic channels and its tendency to shed cancer cells that graft themselves onto other tissues in the abdomen. To prevent such spread as much as possible, Dr. Ogilvie advised his surgical colleagues to remove the whole lymphatic tract along with the cancer and the cancerous stomach, just as in cases of breast cancer, the cancer, the entire breast and all the lymphatic channels and glands are removed.

Best Birth Certificate

A PALM print taken of baby's chubby little hand when he is born is the best birth certificate he can have, Dr. Gilbert P. Pond, of the West Suburban Hospital, Oak Park, Ill., told members of the American College of Surgeons meeting at the Hospital Standardization Conference.

If new-born babies get mixed-up in the hospital, as they sometimes do, in spite of bracelets or other identifying tags, palm prints taken at birth would pro-

vide conclusive evidence of the baby's identity. It is a method of identification that will stand the test of the highest courts, Dr. Pond said.

Foot printing, once popular for this purpose, is definitely out, Dr. Pond indicated, because it is not reliable and not lasting.

Besides preventing baby mix-ups, when the wrong parents take home the wrong baby, palm prints have other important uses. If universally adopted, it would, Dr. Pond said, provide: an incontrovertible proof of birth and identity for the life of the infant; a means of identifying abandoned children and foundlings (and would consequently deter child abandonment); a means of identifying returned, kidnapped children regardless of time and even after death; a means of identifying unknown children after such major disasters as earthquakes or extensive conflagrations; a means of identifying cases of amnesia, unconsciousness and unknown dead after a generation of prints were on file; a record of relationship between the infant and its mother if her fingerprints are placed on the same card as the infant's palm prints.

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PLANT PATHOLOGY

Gas Attack Treatment Saves Tobacco Crop

Double Fumigation With Benzol Kills Blue Mold Fungus; Way Open For Application of Method to Other Diseases

AMERICA'S great tobacco crop has been saved from its most menacing enemy by a gas warfare method, and the way opened for application of the same method in attacks on other plant diseases, by scientists of Duke University and the Virginia Agricultural Experiment Station in cooperative investigations.

"Mugged" as Blue Mold by the tobacco growers, and "finger-printed" as *Peronospora tabacina* by the experts, this Tobacco Enemy No. 1, which is a plant itself, was singled out of several thousand plant diseases for special investigation by the scientists.

The mold is a true gangster in the tobacco seed beds. It works only in darkness, preferably between midnight and daylight. Like certain human diseases, it thrives best only upon a healthy living host.

Its dust-like reproduction bodies, or spores, are scattered far and wide by the winds, or fall to the ground in leaves and there lie in wait for any tobacco plants which unsuspecting farmers may plant in the infested soil. The wind-borne spores, which scattered from Florida to Canada last year, send out feeding tubes into any part of the tobacco leaf, even the hairs, but only when dew or water is on the leaf. Although it sometimes appears in the fields, in early spring, its greatest destruction is to be found in tobacco seed beds, and all growers have learned to fear it.

When sprays were applied, their disinfecting action did not always reach the microscopic spores. Almost simultaneously, investigators in Australia and at Duke University realized that new technics in plant protection were neces-