

DIABETIC NOSTRUMS AND QUACKERY

Responsible persons in both government and medicine have long regarded it as their duty to protect the public from medical quackery. The only means of so doing are public education and legal procedures aimed at restraining or punishing the purveyors of such misbranded remedies.

Governmental agencies and medical organizations should, and do, supplement each other in these activities. In the matter of education, both have done less than is needed. Specialized medical societies, such as those for diabetes, tuberculosis and cardiac disorders, because they publish literature for patients and their relatives and friends who are personally interested in particular diseases, have a unique opportunity not enjoyed by organizations which spread their educational efforts over the populace at large. Reaching highly selected audiences, these societies can expose specific fraudulent practices to those who will listen because they are directly concerned.

Respecting the restraint and punishment of charlatans and the suppression of their wares, the government has the ultimate responsibility. The Food and Drug Administration, the Federal Trade Commission, and the Post Office Department have been active in ferreting out violations of the law and bringing offenders to justice. Here again, however, the medical organization interested in a single disease can be of the greatest service in calling attention to undesirable situations of which it has special knowledge and which, because of their number and local character, might otherwise be overlooked by the federal authorities.

Since 1941 the American Diabetes Association has had a standing committee dealing with nostrums. This type of activity is now included in the duties of the Committee on Therapeutics. This committee contributes to public education by cooperating with the editors of the ADA FORECAST in dispelling popular illusions about the treatment of diabetes and in exposing fraudulent remedies and "cures". Questions addressed to the Association are referred to the committee. The chairman, acting either upon his own responsibility or upon the advice of his colleagues, provides the answers to these queries within the scope of the committee.

The appearance of new nostrums, and the resurrection of old ones, frequently are brought to the attention of the committee by its own members, who are scattered widely over the country for scouting purposes, and by other alert members of the American Diabetes Association. Information thus acquired is checked with the

comprehensive files of the Bureau of Investigation and the Council on Pharmacy and Chemistry of the American Medical Association, with which the committee maintains a close liaison. The matter is then referred to the Food and Drug Administration, the Federal Trade Commission, or the Post Office Department, or all three, for action. Not uncommonly these agencies learn of a new nostrum for the first time through this committee. Committee members have testified, as individuals, in legal actions brought against unscrupulous manufacturers and distributors. The record of convictions in such cases is impressive.

The value of the Committee on Therapeutics stands in almost direct proportion to the diligence of physicians in reporting to it any obviously worthless treatment for diabetes which they may encounter.

HENRY T. RICKETTS, M.D., *Chairman,*
Committee on Therapeutics

RECOVERY FROM RETINOPATHY

Spontaneous recovery from diabetic retinopathy is extremely rare. Improvement in vision of any degree is encouraging, but the complete disappearance of the objective evidence of retinopathy is of considerable significance. Poulsen's well-documented case report appearing in this issue of DIABETES, thus deserves special attention.

The significance of the observations in this case is two-fold. First, the complete reversibility of the pathological changes in the retina is demonstrated. Second, light is thrown on the etiology of the condition. The occurrence of Simmonds' disease preceded the spontaneous cure of the retinopathy. Thus hypofunction of the pituitary and presumably of the adrenal glands appeared to exert a beneficial influence in respect to the retinal condition. This rare accident, therefore, supports the theory first suggested by Becker that relative hyperfunction of the adrenal may be the precipitating cause of the retinopathy in diabetics.

In any case, solid evidence that recovery from diabetic retinopathy can occur should give great encouragement to all who are searching so eagerly for effective treatment and for means of prevention of this serious complication of diabetes.

JONAS S. FRIEDENWALD, M.D.

THE HEART IN HEMOCHROMATOSIS

In a recent paper, Swan and Dewar¹ called attention to those occasional patients with hemochromatosis in whom