

In choosing to illustrate your article¹ with — horror of horrors — a photo of canned commercial chicken soup, you have made a monumental error. The authors are Israeli, which should have been a clue. As any of your Canadian Jewish colleagues could have told you, only mother's authentic home-made chicken soup qualifies as a panacea for all of mankind's ills.

William E. Goodman

Otolaryngologist (retired)
Freelance author, public speaker
Toronto, Ont.

Reference

1. Ohry A, Tsafrir J. Is chicken soup an essential drug? *CMAJ* 1999;161(12):1532-3.

I read with great interest the suggestion by Abraham Ohry and Jenni Tsafrir that chicken soup be considered an essential drug.¹ I endorse this recommendation on the basis of my interpretation of the medical writings of the renowned 12th century physician Moses Maimonides.

Ohry and Tsafrir quoted Maimonides' recommendations that chicken soup be used to treat leprosy, migraine, constipation and the "black humours" (an excess of which was thought to cause melancholy). In his *Medical Aphorisms*² Maimonides also made several other recommendations. He stated that the consumption of fowl is beneficial for feebleness, hemiplegia, facial paresis and the pain of edema and that it increases sexual potential. He advised that turtledoves increase memory, improve intellect and sharpen the senses and that house pigeons that graze in the streets increase natural body heat. Soup made from the bird called kanaber loosens cramps of colic. Chicken testicles provide excellent nourishment for a weakened or convalescent individual. Pigeon eggs are good aphrodisiacs, especially when cooked with onion or turnip. Soup made from an old chicken is of benefit against chronic fevers that develop from white bile, and it also aids the cough that is called asthma.

In his *Treatise on Asthma*,³ Mai-

monides advised asthma sufferers to consume the soup of chickens or fat hens. He strongly endorsed the use of an enema with sap of linseed, fenugreek or both, with oil and chicken fat and an admixture of beet juice, to treat asthma.

It thus seems evident that Maimonides, in the 12th century, gave scientific respectability to what the proverbial Jewish mother has always known — that chicken soup can help cure a variety of ailments.⁴

Fred Rosner

Mount Sinai Services
at Queens Hospital Center
Jamaica, NY

References

1. Ohry A, Tsafrir J. Is chicken soup an essential drug? *CMAJ* 1999;161(12):1532-3.
2. Rosner F. *The medical aphorisms of Moses Maimonides*. Haifa: Maimonides Research Institute; 1989. p. 293-312.
3. Rosner F. *Moses Maimonides' treatise on asthma*. Haifa: Maimonides Research Institute; 1994. p. 176.
4. Rosner R. Therapeutic efficacy of chicken soup. *Chest* 1980;78:672-4.

[The authors respond:]

We couldn't agree more with William Goodman. The fact that chicken soup has been around for at least 2000 years implies that only the genuine article has true medicinal qualities, and not the precooked, synthetic or dehydrated upstart.

We thank Fred Rosner for his illuminating remarks. We had decided, for the sake of brevity, to refer only to his 1980 article in *Chest*, which contained the references to Maimonides' writings, but are grateful that he has now expanded the information to include fuller details of the therapeutic properties of chicken soup and of other fowl-associated remedies.

Abraham Ohry

Department of Neurorehabilitation
Chaim Sheba Medical Center
Tel Hashomer, Israel

Jenni Tsafrir

Medical Library
Chaim Sheba Medical Center
Tel Hashomer and Tel Aviv University
Israel

Corrections

An error was introduced into a recent letter from Emile Berger¹ during copyediting. The date of publication of the third reference was 1999, not 1990.

Reference

1. Berger E. High marks for the physical exam [letter]. *CMAJ* 2000;162(4):492-3.

Owing to a copyediting error, the affiliation information for one of the authors of a recent *CMAJ* article was published incorrectly.¹ Susan Foster is with the London School of Hygiene and Tropical Medicine, which is affiliated with the University of London in Britain.

Reference

1. Clark WF, Churchill DN, Forwell L, Macdonald G, Foster S. To pay or not to pay? A decision and cost-utility analysis of angiotensin-converting-enzyme inhibitor therapy for diabetic nephropathy. *CMAJ* 2000;162(2):195-8.

In the article by Jaime Caro and colleagues on anticoagulation for patients with atrial fibrillation,¹ it was stated in the introduction that "warfarin is being prescribed for only about two-thirds of patients with atrial fibrillation." In fact, the 5 articles that the authors cited to support that estimate report rates that vary between 32% and 40%. The authors regret this inadvertent misrepresentation of the reported rates.

Reference

1. Caro JJ, Flegel KM, Orejuela ME, Kelley HE, Speckman JL, Migliaccio-Walle K. Anticoagulant prophylaxis against stroke in atrial fibrillation: effectiveness in actual practice. *CMAJ* 1999;161(5):493-7.