

HYDROPHOBIA AND RABIES.

THE Committee recently appointed by the Scientific Grants Committee of the British Medical Association "to organise an inquiry into the Causation, Pathology, and Treatment of Rabies and Hydrophobia", consisting of Mr. Callender, F.R.S., Dr. Burdon Sanderson, F.R.S., Dr. T. Lauder Brunton, F.R.S., Mr. Ernest Hart, and Dr. Gowers, desire to announce that they will feel favoured if any medical gentleman having under his care a case of hydrophobia will kindly communicate with them. In any cases of hydrophobia or of rabies in which a *post mortem* examination is made, they will be glad to receive for investigation the following parts; namely, the spinal cord, medulla oblongata and pons Varolii, a small piece of the cerebellum, corpus striatum, convolutions of the middle third of the brain, one of the salivary glands, the nerves leading to the part bitten, portion of the liver and of the kidneys, and the scar. These should be at once placed in a mixture of equal parts of spirit and water (or, if the organs be at all softened by commencing decomposition, in a mixture of three parts of spirit to two parts of water), and forwarded with as little delay as possible, together with a report of the *post mortem* appearances, to the Office of the British Medical Association, 36, Great Queen Street, London, W.C.

The members of the Committee are also anxious to have the opportunity of visiting cases of hydrophobia under treatment, or of attending any *post mortem* examinations in fatal cases.

At a recent meeting of the magistrates of the county of Cornwall, the chief constable called the attention of the Court to the spread of hydrophobia in this county. Notwithstanding that every precaution has been taken in the districts where it exists to prevent it, he regretted to have to report that one child had died from it, and two other persons had been bitten by a mad dog. One horse, two head of cattle, fifty sheep, seven pigs, five cats, and fifty-three dogs had been killed or died of the disease, and he feared there were still many animals alive in the county that had been bitten by mad dogs. Colonel Tremayne desired to obtain some information with reference to the number of unlicensed dogs in the county. He knew there were a great many, but he did not hear of very many prosecutions, and he could not help thinking that if the law were altered, and the police had the power to prosecute, the dog nuisance would be greatly abated. The chief constable replied that the police could only report to the Excise, as they had done in a great number of cases; within the last month, no less than sixty-one such cases were reported at Liskeard alone. Many cases were dropped, and he knew that many were compromised, while others came before the magistrates; but whether they were all reported at Somerset House or not, it was quite impossible for him to say. A motion was passed to the effect that the attention of the authorities at Somerset House should be called to the fact of so many reports having been made without being followed by prosecutions.

An inquest was lately held at Wycombe Marsh, High Wycombe, on the body of a child named F. E. Rumbelow, aged 7. The deceased was bitten by a black and tan terrier dog, and some days later was taken ill at school. A wound on her leg, caused by the bite, was very much inflamed, and her mother applied cold water bandages. On the following morning, the child said the wound was not so painful, but complained of soreness in the throat. She gradually got worse from that time, and died displaying all the symptoms of hydrophobia. The deputy-coroner (Mr. G. A. Charsley) hoped the Chancellor of the Exchequer would take some restrictive steps regarding dogs during next session.

HOSPITAL AND DISPENSARY MANAGEMENT.

THE PLYMOUTH FREE AND PROVIDENT DISPENSARIES.

MR. W. H. ALGER has forwarded to us a copy of a pamphlet on the *Outline of a Scheme for the Amalgamation of the Plymouth Public and Provident Dispensaries*. The Court of the Governors of the Public Dispensary have resolved that "this Court gives power to its Committee to adopt the provident system in connection with this institution". Mr. Alger proposes that effect should be given to this resolution in the following manner. In future, a subscription of one guinea to the Public Dispensary should entitle the subscriber to four recommendation papers. These recommendation papers should be given to applicants for medical advice, not as a title to gratuitous treatment, but, as it were, as payment on their behalf of the sick fines, which—not having previously become members of the provident dispensary—

they would, according to the usual rules of a provident dispensary, be required to pay on admission to its benefits during illness. The subscriber would thus have in his hands the power of absolving from the sick fine those to whom he gave his paper of recommendation. After being admitted in this way, the patient would take his place as an ordinary provident dispensary member, and would pay sixpence, which would thus be considered equivalent to the weekly payment of an ordinary member for six weeks. After six weeks, the patient would be induced, if possible, to continue his weekly or monthly prepayment, and he would not be allowed to have the benefit of medical attendance on any other footing for another six weeks, unless it were found on inquiry that he was a suitable recipient for further gratuitous advice. Mr. Alger points out that "in this way, whilst the provident system would be engrafted upon the Public Dispensary, yet the charity would still be holding out a welcome hand to those poor persons who could not afford to pay for medical assistance; and the investigations which would be made into the merits of each case, whilst weeding out improper persons, would doubtless bring into notice the really necessitous cases, and thus enable the benevolent to render aid to them in other ways". The scheme is a good one, and we shall be glad to hear that it has been adopted.

ASSOCIATION INTELLIGENCE.

BATH AND BRISTOL BRANCH.

THE third ordinary meeting of the Branch will be held at the York House, Bath, on Wednesday evening, January 30th, at a quarter past Seven o'clock: H. MARSHALL, M.D., President.

The evening will be devoted to the discussion of Hospitalism, which will be opened by R. W. Tibbits, M.B.

R. S. FOWLER, } *Honorary Secretaries.*
E. C. BOARD, }

Bath, December 31st, 1877.

DUBLIN BRANCH.

THE first annual meeting of this Branch will be held in the Hall of the King and Queen's College of Physicians, Kildare Street, on Wednesday, January 30th, at 4 P.M. The President, Dr. HUDSON, will deliver an address.

The annual dinner of the Branch will also take place at 7 P.M. the same evening in the College.

GEORGE F. DUFFEY, M.D., *Honorary Secretary.*

30, Fitzwilliam Place, Dublin, January 8th, 1878.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH:
ORDINARY MEETING.

THE third ordinary meeting of the session 1877-8 was held in the Queen's College, Birmingham, on December 13th: present, Mr. SAMPSON GAMGEE, President, in the Chair, and thirty-six members.

New Members.—The following members of the Association were elected members of the Branch: Mr. Bradford, Smethwick; Mr. Farncombe, Mr. Hex, Mr. S. F. Palmer, Mr. Suffield, Mr. H. W. Thomas, and Dr. Vinrace, of Birmingham.

Communications.—The following communications were made.

1. Dr. B. Foster: Obstructive Jaundice and Cancer of Liver.
2. Mr. Lawson Tait: Myxoma Uteri.
3. Dr. Saundby: Intestinal Pathology.
4. Mr. H. L. Browne read a paper on Stricture of the Urethra, showed some new instruments for the treatment of urethral stricture, and exhibited a patient upon whom he had successfully performed the operation of perineal section.
5. Mr. Bartleet read a paper entitled Notes on the Treatment of Wounds. A discussion followed, in which Mr. Gamgee, Dr. Monckton, Mr. Yates, Mr. J. H. Palmer, Mr. H. L. Browne, Mr. J. F. West, and Dr. Taylor shared.

The Annual Meetings of the Association.—Mr. MORGAN (Lichfield) moved: "That it is desirable that a Local Reception Committee be formed in the town where each annual meeting of the Association is to be held, so as to provide, as far as possible, private hospitality for the members." Dr. MONCKTON (Rugeley) seconded the motion. After remarks from Dr. Foster, Mr. Watkin Williams, and the President (who suggested that the question be brought before the Committee of Council of the Association by the senior Secretary), Mr. Morgan withdrew his motion.

exfoliated, and it did not finally heal until four years after the accident. Photographs of the case were also exhibited.

Removal of Portion of Silver Catheter from Bladder.—The patient was a man aged 75, with prostatic enlargement, and had been accustomed to catheterise himself. Mr. Jackson removed the portion of catheter by the operation for lateral lithotomy. The case, however, terminated fatally, and the piece of catheter extracted was exhibited, measuring about five inches in length.—Remarks were made on the case by Mr. PYE-SMITH, Dr. DE BARTOLOMÉ, Mr. DYSON, and Dr. KEELING.

Deformed Forearm and Hand.—Mr. SNELL exhibited the dissected specimen, from a male subject in the dissecting-room at the Medical School. There were a rudimentary thumb and index finger. The radius passed obliquely across the forearm, did not directly articulate with the carpus, but was separated from it about an inch and connected by a loose capsule. The ulna terminated some little distance above the radius in a hooked extremity.

Calculus Removed from Urethra.—Mr. W. M. JONES exhibited the specimen, and stated that he had removed it from a child by means of a loop of steel piano wire.

Intracapsular Fracture of Neck of Femur.—Mr. RECKLESS showed the specimen, which was from the body of a woman aged 73. Fracture had occurred two months before death. There was no attempt at union.

Imperforate Anus.—The rectum terminated in a *cul-de-sac*. Dr. HARGREAVES exhibited the specimen, and stated that the child lived fourteen days.

Rupture of Uterus in the Third Month of Pregnancy.—Mr. EDWARD SKINNER related the case. The patient was a young woman aged 23. The *post mortem* examination disclosed a rupture of body of uterus at its upper and posterior part; the placenta was protruding, and the foetus was in abdomen. There was no history of a fall or blow, and the rupture was thought to be the result of softening. It was the second pregnancy.—Dr. KEELING remarked on the rarity of rupture at this period of gestation, and on the bearing of this to the softness of the uterine walls.

Adjourned Discussion: Pyæmia.—The debate on Mr. Jackson's paper was resumed by Mr. SNELL, and continued by the PRESIDENT, Mr. JONES, Mr. B. WALKER, Dr. DYSON, and Mr. JAMES. Mr. JACKSON replied.

PATHOLOGICAL SOCIETY OF DUBLIN.

SATURDAY, DECEMBER 8TH, 1877.

EDWARD HAMILTON, M.D., President, in the Chair.

Dislocation of Spine.—Dr. T. E. LITTLE presented a case of dislocation of the spine, in a young man aged 18, who died eighty-five days after the receipt of the injury. He fell down the hold of a vessel on his back and shoulders. He was able to walk into the hospital with assistance. There was complete motor, and partial sensory, paralysis in the upper extremities; but, in the lower limbs, no lesion of either motion or sensation existed until two months had elapsed. Marked flusbing of the face, etc. (vaso-motor paralysis), was observed. On the tenth day complete atrophy of the muscles of both forearms set in, so that Cruveilhier's paralysis and "la main en griffe" became well marked. The skin of the hands and fingers assumed a glazed appearance. Paralysis of the intercostal muscles led to dyspnoea in expiration, inability to expectorate, and finally apnoea and death. The urine had been acid until a week before he died. There was a dislocation of the fifth from the sixth cervical vertebra, the articular processes of the fifth being hitched in front of those of the vertebra below. The spinal canal was narrowed to half its normal lumen. A greyish spot existed in the anterior columns of the cord. There was intermuscular wasting.—Dr. BOOKEY alluded to Dr. McKendrick's observations on colloid degeneration in the spinal cord in cases of trauma.—Dr. W. G. SMITH regarded the case as specially interesting, because it showed that the glossy appearance of the fingers, noted by Sir James Paget in peripheral nerve-lesions, may occur also in central paralysis.—Dr. FINNEV asked whether the external or internal intercostals were the more paralysed.—Dr. LITTLE said both were extremely atrophied.

Saccular Aneurisms (Virchow).—Dr. NIXON showed the brain, lungs, and kidneys of a woman who had died of apoplexy, the result of an extensive meningeal hæmorrhage from a saccular (miliary) aneurism situated on the right middle cerebral artery. The left artery also was the seat of a similar aneurism. The kidneys were intensely congested and the lungs were engorged with blood; this functional hyperæmia being symptomatic of the lesion in the neighbourhood of the aneurism which had ruptured.

Lesions in Morbus Coxæ.—Dr. E. H. BENNETT exhibited the head and

neck of a femur, removed by excision from a boy nine years of age, suffering from morbus coxæ in the stage of suppuration. He also exhibited the innominate bone and femur of the same patient, removed *post mortem* seven months after operation. The operation had been undertaken when abscess had been discharging for some time, and when the rapid progress of hectic fever indicated a speedy end to the case. The viscera were healthy at the time of operation. Marked relief followed the operation, the temperature and other febrile phenomena falling. This improvement was maintained for more than a month, when progressive disease of the pelvis was observed, with a gradual increase of suppuration, and finally the development of hepatic enlargement. The death occurred seven months after the operation. The femur was found healthy, the point of compact tissue which lay against the carious pelvis alone showing any disease. Extensive caries of the innominate, which had not at the time of operation extended outside the acetabulum, affected the dorsum ilii and all the surroundings of the acetabulum. An intrapelvic abscess also existed, springing from the perforated floor of the acetabulum.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, December 27th, 1877.

Campbell, William Frederick, Chippenham Road, St. Peter's Square
Lloyd, George Jordan, South Wreath, Birmingham
McCarthy, George, Kinnare, Ireland
MacIlhatton, Alexander, Treorkey, South Wales

The following gentleman also on the same day passed his primary professional examination.

Dunlop, James Hay, Guy's Hospital

The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, January 3rd, 1878.

Clarke, Thomas Furze, Richmond, Surrey
Dingley, Allen, Argyle Square, King's Cross
Ellison, Frederick William, Leytonstone
Richardson, Richard Tippetts, Kingston-on-Thames
Thomas, Richard Weddall, York

The following gentlemen also on the same day passed their primary professional examination.

Baber, Henry Aitkens, Guy's Hospital
Collins, George Duppa, King's College Hospital

MEDICAL VACANCIES.

THE following vacancies are announced:—

BALROTHERY UNION.—Medical Officer for the Lusk Dispensary District. Salary, £125 a year as Medical Officer, and £20:16:8 as Sanitary Officer, with the usual Registration and Vaccination Fees. Election on the 10th instant.
CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST.—Assistant-Physician. Applications to be made on or before the 26th instant.
DURHAM COUNTY HOSPITAL.—House-Surgeon. Salary, £100 per annum, with board and lodging. Applications to be made on or before the 26th instant.
IPSWICH BOROUGH LUNATIC ASYLUM.—Assistant Medical Officer. Salary, £100 per annum, with furnished apartments, board, washing, and attendance.
KENT COUNTY LUNATIC ASYLUM.—Assistant Medical Officer and Dispenser. Salary, £165 per annum, with furnished apartments, milk, vegetables, washing, and attendance. Applications to be made on or before February 6th.
NEWCASTLE-UPON-TYNE INFIRMARY.—Senior House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to be made on or before February 4th.
SALFORD and PENDLETON ROYAL HOSPITAL.—House-Surgeon for the Pendleton Branch. Salary, £100 per annum, with board and lodging. Applications to be made on or before the 16th instant.
SUNDERLAND and BISHOPWEARMOUTH INFIRMARY.—Senior House-Surgeon. Salary to commence at £80 per annum, with board and residence. Applications to be made on or before the 24th instant.
WARMISTER UNION.—Medical Officer for the Longbridge Deverill District. Salary, £80 per annum. Applications to be made on or before the 14th instant.

MEDICAL APPOINTMENTS.

Names marked with an asterisk are those of Members of the Association.

ALLAN, James, M.B., appointed Senior House-Surgeon to the Northern Hospital, Liverpool, *vice* A. Craigmile, M.B., resigned.
*COOMBS, Rowland H., L.R.C.P., appointed Medical Officer in Ordinary to the Bedford General Infirmary, *vice* George Wharton, M.D., Physician to the Infirmary, deceased.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the announcement.

DEATH.

LANG, John, M.D., of Southport, aged 49, on January 5th.

OPERATION DAYS AT THE HOSPITALS.

MONDAY.....	Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal Orthopaedic, 2 P.M.—London, 3 P.M.
TUESDAY.....	Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—National Orthopaedic, 2 P.M.
WEDNESDAY..	St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—King's College, 1.30 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.
THURSDAY....	St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—St. Thomas's (Ophthalmic Department), 4 P.M.—London, 3 P.M.
FRIDAY	Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 2 P.M.—Guy's, 1.30 P.M.
SATURDAY....	St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—East London Hospital for Children, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.—London, 2.15 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

- MONDAY.**—Medical Society of London, 8.30 P.M. Mr. Wordsworth will bring forward Six Persons having Congenital Displacement of the Crystalline Lens; Dr. Foulis of Glasgow will read a paper on Excision of the Larynx, and exhibit a patient on whom the operation has been performed.
- TUESDAY.**—Pathological Society of London, 8.30 P.M. Mr. Wagstaffe: Dermoid Cysts along Branchial Fissures. Mr. Dowse: Case of Paralysis Agitans. Dr. Garlick: Diaphragmatic Hernia. Dr. Ralfe: 1. Phosphatic Diabetes; 2. Gangrene of Lung with Lead-poisoning. Dr. Greenfield: 1. Aneurysm of Cerebral Arteries; 2. Aneurysm of Brachial Artery from Embolism. Dr. I. Burney Yeo: Rupture of the Aortic Valves. Mr. Bryant: 1. Prostatic Tumours removed during Lithotomy; 2. Impacted Fracture of Shaft of Femur. Mr. Nunn: Sequel to Case of Recurrent Sarcoma. And other Specimens.
- THURSDAY.**—Harveian Society of London, 8 P.M. Casual Communications. Dr. Ashburton Thompson, "On the Pulse-rate considered in relation to Post partum Hæmorrhage".

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

- CORRESPONDENTS** not answered, are requested to look to the Notices to Correspondents of the following week.
- AUTHORS** desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the printer, Mr. Thomas Richards, 37, Great Queen Street, W.C.
- PUBLIC HEALTH DEPARTMENT.**—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with Duplicate Copies.
- WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.**
- COMMUNICATIONS** respecting editorial matters, should be addressed to the Editor, 37, Great Queen Street, W.C.; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 36, Great Queen Street, W.C., London.
- CORRESPONDENTS**, who wish notice to be taken of their communications, should authenticate them with their names—of course not necessarily for publication.

The following communications have been handed to the General Manager:—Mr. R. J. Baylon, Cork; Mr. G. H. Larmuth, Salford; Dr. John Easton, London (with enclosure); Mr. Henry Foxton, Bristol; Dr. R. Thorne Thorne, Mr. T. Wallace, Mr. J. G. Braden, Mrs. E. Bogle, and Dr. Frazer.

LIP-READING.

We have had communicated to us, by Staff-Surgeon R. Nelson, R.N., a case illustrative of a method of teaching the deaf and dumb to comprehend the observations made to them by the process known by the name of lip-reading, which has been carried out with great perfection by Mr. Van Praagh at the Jews' Deaf and Dumb Institution, Fitzroy Square. The case was that of a seaman aged 21, who lost the hearing of one ear in 1874, while employed at gunnery drill, and that of the other in 1876, while similarly engaged. In less than three months' time, the sick berth attendant, by simply giving a more decided and slower motion to the lips than in ordinary language, made the patient understand everything he wished to convey to him. Shortly afterwards, some others of the ship's company achieved a like result. The observations of Mr. Nelson lead him to the conclusion that three things are necessary for successfully carrying out this system—namely, light, to enable the pupil to observe every lip-gesture distinctly; proximity of pupil and teacher; and that the pupil must have a full-face view of the teacher.

INDIAN GUIDE.

SIR,—The book called *The European in India; or, Anglo-Indian's Vade Mecum*, by E. C. P. Hull and R. S. Mair, M.D., F.R.C.S.E., is published by Henry S. King and Co., of 35, Cornhill, London. The copy I have cost four rupees four annas in Bombay.—I am, yours, R. J. MAITLAND COFFIN.
4, Wetherby Terrace, Earl's Court Road, South Kensington, Jan. 1878.

NOTICE TO ADVERTISERS.—Advertisements for insertion in the BRITISH MEDICAL JOURNAL, should be forwarded direct to the Publishing Office, 36, Great Queen Street, W.C., addressed to Mr. FOWKE, not later than *Thursday*, Twelve o'clock.

ADVERTISERS are requested to take notice that the regulations of the Post Office do not allow letters to be addressed to initials and directed to any Post Office in the United Kingdom, but letters may be addressed to initials to the JOURNAL Office or any stated address other than a Post Office.

COMPOSITION AND QUALITY OF THE METROPOLITAN WATER IN DECEMBER 1877. The following are the returns made by Dr. C. Meymott Tidy to the Society of Medical Officers of Health.

Names of Water Companies.	Total Solid Matter per Gallon.	Oxygen used to Oxidise Organic Matter.	Nitrogen As Nitrates, &c.	Ammonia.		Hardness. (Clarke's Scale.)	
				Saline.	Organic	Before Boiling.	After Boiling.
<i>Thames Water Companies.</i>	Grains.	Grains.	Grains.	Grains.	Grains.	Degs.	Degs.
Grand Junction ..	19.20	0.134	0.130	0.000	0.008	12.6	3.7
West Middlesex ..	19.80	0.083	0.135	0.001	0.008	13.2	4.8
Southwark and Vauxhall	18.70	0.127	0.130	0.001	0.009	12.1	4.2
Chelsea	13.90	0.065	0.120	0.001	0.013	12.6	3.3
Lambeth	20.30	0.083	0.120	0.002	0.009	13.7	3.7
<i>Other Companies.</i>							
Kent	27.90	0.003	0.310	0.000	0.003	18.6	6.0
New River	20.20	0.036	0.150	0.000	0.007	14.3	3.3
East London	14.90	0.036	0.096	0.001	0.007	9.0	3.7

Note.—The amount of oxygen required to oxidise the organic matter, nitrates, etc., is determined by a standard solution of permanganate of potash acting for three hours; and in the case of the metropolitan waters, the quantity of organic matter is about eight times the amount of oxygen required by it. The water was found to be clear and nearly colourless in all cases but the following, when it was slightly turbid—namely, in that of the Grand Junction.

MEDICAL ETIQUETTE.

SIR,—I have lately purchased a practice in the hamlet of S., separated from a town (T.) by a river (which during the day may be crossed either by ferry or by bridge). The latter way is a mile and a half round (there is also a high toll), and is the only available way at night. I am called up at night to see a patient taken, as I am told, suddenly much worse. The regular attendant (Mr. E.) from the town T. has not seen the patient for three weeks. I see the patient and prescribe a draught, telling them to send for Mr. E. in the morning, which they do. I get no call or thanks from Mr. E. Some time afterwards I am asked to go and see the same patient at 9 P.M., but refuse to go, telling them that if Mr. E. asks me or sends a card I will do so. They send over a messenger, who brings back medicine and a card for Mr. B., if it should be necessary during the night.

Is it the rule for a new settler to call on his neighbouring medical brethren first? It is bad enough to be called up to one's own patients during the night, but to be called up to other people's and get no thanks hardly suits my way of thinking, and my health not at all. If you would give an opinion, you would confer a great benefit on, yours faithfully,

B. was fairly entitled to thanks from Mr. E. We think his best plan would be to seek an interview with Mr. E., so as to make some amicable arrangement with regard to the visiting of patients at night, in view of the difficulty of transit to which he refers.

SIR,—Mr. Box has, I repeat, brought a criminal charge against me, and has as yet, though challenged, produced no evidence in support. His letter in your last issue differs so materially from his former statement, that I am tempted to offer a few remarks thereon. In the first letter, Mr. Box says, talking of the injury to the ulna, "We were unanimously of opinion that this was not from fracture. It felt like a small node, and seemed probably to have been caused by pressure of the bone against some sharp edge, injuring the periosteum." Now, as Mr. Box is not a legal or editorial character, "We" must apply to all the gentlemen present as holding the opinion expressed in the passage. This week, however, he states the case thus: Decided by all—1. Certain fracture of radius well united. (Who said otherwise?) 2. Ulna not broken opposite radius. (Quite true.) 3. Injury to the ulna not decided on, but pronounced obvious. (The pressure theory Mr. Box's own.) And now for the strangest part of the story. Mr. Box has had in his possession since the examination of the man at Shrewsbury a certificate, signed by Messrs. Wood and Harris, stating the result of their examination of the arm in question. Why has Mr. Box not mentioned this fact, and forwarded the certificate for publication, instead of giving the opinion of these gentlemen second-hand? Messrs. Wood and Harris are both gentlemen of high standing, and in the absence of the accused party, would only give Mr. Box a certificate well considered, and stating their opinion of the case as they found it. Let Mr. Box forward this certificate, and any other evidence (not second-hand) he can.

I am much obliged to Mr. Box for leaving me to publish his third letter. It appears to me, however, more to prejudice the author than the case. Hoping Mr. Box will conclude his case, so that I can answer it as a whole, I am, sir, yours obediently,

AN APPEAL.

MR. SCARNELL wishes gratefully to acknowledge the receipt of the following amounts sent in answer to his appeal.

G. R. Burtt, Esq., Ilminster	£1 1 0
Dr. J. Donaldson	0 5 0
T. Corbett, Esq., Kingston-on-Thames ..	0 10 6
M. Harris, Esq., Bournemouth	1 1 0
"Graduate", Manchester	0 2 6
R. B. Ruddock, Esq., Clifton	5 0 0
An Essex Practitioner	1 0 0
Henry Stear, Esq., Saffron Walden	1 0 0
Dr. Holden, Preston	0 5 0

1, Frederick Place, Penton Place, S.E., January 10th, 1878.

CORRESPONDENTS are particularly requested by the Editor to observe that communications relating to Advertisements, changes of address, and other business matters, should be addressed to Mr. Francis Fowke, General Secretary and Manager, at the Journal Office, 36, Great Queen Street, W.C., and not to the Editor.

PUERPERAL SCARLATINA AND PUERPERAL SEPTICÆMIA.

SIR.—The case of puerperal scarlatina recorded by Mr. W. T. Harries is not inopportune just now, when a discussion is going on in your JOURNAL in reference to Dr. Playfair's recent lecture. Upon this case, and upon the entire subject, bear with significance the words I used in 1875 in the Obstetrical Society (*Transactions*, 1875, p. 263): "I am led to these conclusions by a case of autogenetic puerperal poisoning under my care, in which most if not all the symptoms of scarlatina obtained, but which, recognising to be wholly the consequence of a morbid condition of the uterine system and of the lochia, I attacked by imitating the eliminative action of the uterus—viz., grasping the soft, spongy, uncontracted uterus with my hands, compressing it, and expelling some foul clots—and then washing out the womb and vagina by means of Higginson's syringe, Condy's fluid and warm water being used every two hours, till the lochia became quite inodorous. Had I, however, seen the patient for the first time, when those symptoms, apparently scarlatinal, were well developed, I might have erred in supposing I had a case of scarlatina to deal with, have treated it as such, and lost my patient; but being alive to the puerperal facts of the symptoms, I at once proceeded to deal with it as I have described; and the correctness of my diagnosis was evinced by the immediate improvement, commencing as it did from the very time I got rid of the offensive clots and washed away the foul lochia. All the group of evils in this case might be termed scarlet fever; yet all at once beginning to disappear under the cleansing treatment named, showed incontestably that the diagnosis was correct. Moreover, since her recovery I have made inquiries, and found no exposure to scarlatina was known to have occurred, nor did the malady manifest itself either before or since my patient's illness in the town where she lived." Here I would refer to Drs. Seaton and Howie's allusions to typhus and typhoid, being sometimes diagnosed as septicæmia, and would quote my words at the Obstetrical Society: "My mind has been exercised upon what I consider to be a fact—namely, that scarlatina and typhoid may originate in the same way; that is, from the same infecting source or poison; may be, in fact, the same poison developed in different persons, or in the same persons at different times and under different circumstances; the poison at one time determining to, or having an affinity for, the lymphatic and glandular systems, producing what we know as scarlet fever; at another time determining to, or having an affinity for, the intestines, particularly Peyer's patches, occasioning what we term typhoid fever. In this I am borne out by the independent researches of Dr. John Harley and of Dr. Tilt. Bearing in mind the life-symptoms which exist in scarlet fever, puerperal fever, and in typhoid, also the pathological conditions found after death—and how closely all are allied—if not in many instances actually alike, or so much alike as to make men pronounce different diagnoses, we can understand how readily scarlet fever can run into puerperal, and both into typhoid, and how the eminent Dublin physician, Sir Henry Marsh, came to suppose typhoid may originate puerperal fever; and, finally, how puerperal may clothe itself in the garments of scarlet fever, so that, as in Dr. Haine's and my case, the two affections are hardly distinguishable."—I am, etc.,

G. DE GORRIGUER GRIFITH, Senior Physician to the Hospital for Women and Children.
January 1878.

HYDROPHOBIA: APPLICATION OF FLUID CAUSTIC.

SIR.—Permit me to state that I have on three occasions during the last few months applied nitric acid to dog-bites, by means of an ordinary pipette, which allows easy insertion to the bottom of the wound, and regulation of the quantity of acid used. The result has been satisfactory in each case.—I am, etc.,
Paignton, January 1878.

CHARLES PRIDHAM.

DR. CARLINE (Lincoln).—We believe that the House-Surgeon to a hospital is not entitled to a fee for giving evidence at a coroner's inquest. The question, however, is a strictly legal one, and could be better answered by a lawyer.

INFLUENCE OF MARRIAGE ON EPILEPTICS.

SIR.—Some letters on this subject have lately appeared, but the fate of the children of such marriages has not been noticed. Holding the appointment of medical officer to the Dingle Epileptic Institution, I was induced some years ago to make investigations on this point, and the results I presented in the form of a paper to the Liverpool Medical Institution. Briefly, the results were as follows. Of forty-one patients about whom information was forthcoming, the parents of thirty-two were either alive and in good health, or, if dead, were reported never to have had fits. The parents of six were epileptics; and of the remaining three, drunkards. That is to say, about one in six were the children of epileptics. But of those whose immediate parents were healthy—nine brothers and sisters—two cousins and two aunts were epileptic, thus bringing the hereditary influence more strongly to the front. Among these cases, there were thirteen who had borne children, who numbered together thirty-four. Of these thirty-four children, sixteen are alive and well, eighteen are dead, five being acknowledged as epileptics. From the evident reluctance shown in acknowledging the fact of their children having been epileptic, I have no doubt that the real state of affairs was much worse. Surely, however, there is enough to make a medical man cautious of how he advises marriage among those afflicted with this terrible disease. Indeed, should the legislature not step in to prevent such marriages?—I am, yours,
Liverpool, January 5th, 1878.

W. MACFIE CAMPBELL, M.D.

YOUNG M.D. asks:—Do the families of medical men suffer more from infectious diseases than those of others? He would like to have the opinion of his professional brethren on this point.

MEDICAL OFFICERS OF HEALTH.

SIR.—Please remark on the following. A. was formed into a sanitary district. B., the medical man at A., refused the post of medical officer of health, which was then offered to and accepted by C., a practitioner residing at a distance of five miles from A. In the meantime, another medical man comes to reside in A.; and the term of C.'s appointment having expired, the local board offered the appointment to the local man, on the ground that it is inconvenient to them that their medical officer of health should reside so far away. Is he (the local practitioner) acting unprofessionally in accepting the appointment?—Yours obediently,
January 1878.

MEDICAL OFFICER OF A DISTRICT.

In the circumstances stated, supposing they are all fully stated, we can see no impropriety in the local practitioner undertaking the duties of medical officer of health.

NOTICES of Births, Deaths, Marriages, and Appointments, intended for insertion in the BRITISH MEDICAL JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.

DIPHTHERIA.

SIR.—Dr. Maunsell, in his letter to you in the JOURNAL of the 5th instant, referring to croup and diphtheria, does not say how simple, acute, and specific inflammations are to be distinguished. For my part, I am inclined to think that diphtheria, croup, and acute catarrhal laryngitis may be manifestations of the same blood-poison. Dr. George Johnson considers that croup and diphtheria are the same, and Dr. Reynolds considers croup and laryngitis to be identical; and it is possible that both these authorities may be right; and, if we adopt the axiom that things which are equal to the same are equal to another, the conclusion is obvious. Perhaps each variety might be considered simple when there is no reason to suspect the action of a second blood-poison at the same time; and the converse. The subject is full of interest, and well worth a little discussion; and it is to be hoped that, if the Committee referred to by Dr. Maunsell have not arrived at a conclusion before the next annual meeting, they will at least do something in the way of reporting progress.—I am yours truly,
Southam, January 9th, 1878.

WALTER LATTEY, L.R.C.P.Lond.

WILL Dr. Musket kindly favour the readers of the JOURNAL with the age of the patient suffering from various aneurysms, whose case is so well described by him at page 12 in the JOURNAL of last week?
D. B. BALDING.

OIL OF STAVESACRE IN PSORIASIS.

SIR.—I would wish to state how very efficient I have found the oil of stavesacre to be in cases of psoriasis and ringworm, as recommended by Mr. Balmanno Squire in the JOURNAL some time since. Mixed with olive oil, in the proportion of 1 to 8, and used two or three times as hair-oil, it completely devitalises the parasites and their ova. Two or three applications of the undiluted oil I have found to cure ringworm.—I am, etc.,
WALTER LATTEY.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Post; The Devonport Independent; The St. Pancras Gazette; The Bath Herald; The Western Morning News; The Hull News; The Redditch Indicator; The Derby Mercury; The Preston Guardian; The Scarborough Express; The Jewish World; The Durham Chronicle; The Harrogate Herald; The Sunderland Times; The Lincolnshire Chronicle; The Bromsgrove Weekly Messenger; The Manchester Courier; The Broad Arrow; The Cork Examiner; The Cork Daily Herald; The Rotherham and Masbro' Advertiser; The Liverpool Daily Courier; The York Herald; The North Wales Chronicle; The Sheffield Daily Telegraph; The Blyth Weekly News; The Glasgow Herald; The Nottingham Journal; The Eastbourne Standard; The Scarborough Daily Post; The Isle of Wight Observer; The Sussex Daily News; The Metropolitan; The Leeds Mercury; The Belfast News Letter; The Scotsman; The Cork Constitution; The Freeman's Journal; The Hampshire Post; The Somersetshire Herald; The Isle of Man Times; The Sussex Advertiser; The Herts Advertiser; The Manchester Guardian; The Evesham Journal; The Yorkshire Post; The Coventry Herald; The Wisbech Advertiser; The West Briton and Cornwall Advertiser; etc.

* * * We shall be greatly obliged if correspondents forwarding newspapers will kindly mark the passages to which it is desired to direct attention.

COMMUNICATIONS, LETTERS, etc., have been received from:—

Dr. J. Burdon Sanderson, London; Mr. W. S. Savory, London; Dr. Grimshaw, Dublin; Dr. Liveing, London; Mr. H. C. Burdett, Greenwich; Dr. H. Charlton Bastian, London; Mr. W. Donovan, Whitwick; Mr. F. W. Lowndes, Liverpool; Mr. J. G. Braden, Lewes; Dr. R. Thorne Thorne, London; Mr. F. Wallace, London; Dr. R. Maitland Coffin, London; Mr. J. E. Ferguson, Camphagar, India; Dr. Moore, Belfast; R. N.; Dr. Durance, Paris; Dr. Sawyer, Birmingham; Dr. Beresford, Oswestry; Dr. Atthill, Dublin; The Secretary of the Manchester Medical Society; Mr. E. Walford, Ramsgate; Mr. G. H. Larmuth, Salford; Dr. A. W. Edis, London; The Secretary of Apothecaries' Hall; M.D.; Mr. Lennox Browne, London; Dr. W. Fairlie Clarke, Southborough; The Secretary of the Medical Society of London; Dr. Thomas Keith, Edinburgh; Dr. E. Woakes, London; Dr. G. M. Humphry, Cambridge; The Registrar-General of Ireland; Dr. Mackey, Birmingham; Mr. Jonathan Hutchinson, London; Mr. R. J. Baylon, Cork; Dr. R. Lowther, Carlisle; The Registrar-General of England; Dr. J. Milner Fothergill, London; M.R.C.S.Eng.; Dr. J. W. Moore, Dublin; Mr. G. Eastes, London; Dr. Saundby, Birmingham; Dr. C. Warner, London; Dr. Joseph Bell, Edinburgh; The Secretary of the Harveian Society; Dr. Joseph Coats, Glasgow; Dr. Bradbury, Cambridge; Dr. Joseph Rogers, London; Mr. Wm. Adams, London; Professor Huxley, London; Mr. Power, Dartmoor; Dr. Silver, London; Mr. Henry Sewill, London; Dr. Carline, Lincoln; Dr. Tayler, Anerley; Dr. C. Harrison, Lincoln; Mr. F. W. Lowndes, Liverpool; Dr. W. M. Campbell, Liverpool; Mr. Alban Doran, London; Mr. Thomas Graham, London; Dr. F. H. Daly, Dalston; Mr. G. G. Sparrow, Chichester; Dr. F. C. Cory, Buckhurst Hill; Mr. E. L. Hussey, Oxford; Mr. Monckton, Tunbridge Wells; Dr. P. Bindley, Birmingham; The Secretary of the Pathological Society; Mr. Robert Smith, Sheffield; Our Edinburgh Correspondent; Mr. Charles Pridham, Paignton; Mr. Wagner, London; Mr. Henry Foxton, Bristol; Dr. Louis Henry, Manchester; Our Dublin Correspondent; Mr. Walter Lattey, Southam; W.; Mr. Edwin Morgan, London; Mr. Horace Swete, Worcester; Dr. Frazer, Ventnor; Dr. Brabazon, Bath; Mrs. E. Hogle, London; Our Paris Correspondent; Dr. F. C. Gresham, Bromley; Dr. James W. Browne, Rhyll; Dr. E. H. Lendon, London; Mr. F. Workman, Reading; The Secretary of the Clinical Society; etc.

BOOKS, ETC., RECEIVED.

Transactions of the Clinical Society of London. Vol. x. London: Longman, Green, and Co. 1877.