

tioners, and, by so doing, very much improve the status of the whole profession. Some such plan as this would at once give to our seniors their well earned positions without fear of the unseemly rivalry now existent, and would carry many contingent advantages in its train.

I recommend the suggestion to the notice of your readers.—I am, sir, your obedient servant,
M.D., F.R.C.S.
January 14th, 1878.

SIR,—Permit me to add a brief contribution to the presently debated question of the fees and position of consultants. As a rule, I object to the reopening of ugly wounds when once cicatrisation has begun, so that at present I would fain keep aloof from the introduction of personalities; yet, no explanation having been given by the gentleman referred to by your correspondent "Not a Court or Club Surgeon", in the JOURNAL for December 29th, we may be allowed to infer that none can be given. As I also know something of consulting practice in the North, I wish to further illustrate some of our northern customs. One leading consulting surgeon, to which position, from his years, large experience, and acknowledged ability, he is well entitled, also arrogates to himself the primary place as consultant in medical cases, or at least readily undertakes such duties when called on; he further attends midwifery, going, in some instances, into the country and staying at the patients' homes for some days, at a less fee than the local practitioner could afford to do, presumably to form connection with the families. He has on more than one occasion visited country families, although another medical man was in attendance and ignorant of his so doing; and, but lately, the following incident occurred, which may be given as a sample of consulting tactics. "A patient who, sent from the country to get advice from this said gentleman, had to stay a few days, very properly, till a just opinion was formed of the case; but he returned in a few weeks, to remain for some time under his care as an ordinary patient, and, on leaving, was directed to come back again to repeat the same plan of consultation after the lapse of a few weeks." How long this might have gone on it is impossible to say, had not the sense of the patient been acute enough to discover the peculiarity of this consultation system. Now, it seems to me that such conduct on the part of seniors of the profession does great injury to their own and their junior relationships with the public; it destroys professional confidence, and must necessarily weaken the faith reposed in the ordinary medical attendant. People are but too apt to take advantage of such disharmony, and, therefore, it is that they not only feel inclined to dispute the modest bill of the general practitioner, but demur to the higher scale of fee expected by consultants. In short, if consultants do not keep themselves purely as such, and abstain from grasping the just belongings of their less eminent brethren, they have themselves to blame for being ranked as no better than what they are: general practitioners. If the general practitioner have confidence that his patient will be returned unprejudiced into his hands, he will have more willingness to advise the consultation, which, under the too frequently abused system referred to, he is often justly anxious to avoid. If the consultant, on the other hand, behave honourably to his brethren, he will seldom find his pecuniary interests injured thereby; it will be for the advantage of his clients, as well as their usual attendants, that the recognised fee of one, two, or three guineas shall be forthcoming.

"By outward show let's not be cheated;
An ass should like an ass be treated."

January 1878.

Yours obediently,

ABERDEENSHIRE.

EXTENSION IN HIP-JOINT DISEASE.

SIR,—I confess to having read with surprise Mr. Adams's statement in your number of January 5th, to the effect that the application of extension by means of a weight for the purpose of relieving the pain of hip-joint disease is the greatest discovery of modern times in the treatment of that affection, and that the originality of that discovery is claimed by Dr. Henry G. Davis of New York. I have used and seen used this method of treatment for, I should say, at least twenty-five years. I claim no originality in the method; for it was certainly used by my predecessor, at the Hospital for Sick Children, Mr. Athol Johnstone; and, in Mr. Marsh's paper, to which Mr. Adams gives a reference, there is a quotation from Sir B. Brodie's first edition very clearly recommending it. The plan of tying the weight on by means of a stirrup of strapping is, I believe, an American idea. In Mr. Marsh's paper, it is attributed to Professor Pancoast. Whether this be so or no, I think I am justified in saying that it was in use long before the year 1855, which Mr. Adams fixes on as that of Dr. Davis's supposed discovery. But, though a convenient and very practical idea, this can hardly be called a great discovery. There is no question at all

that we now know the value of continuous extension much more clearly than our predecessors did; but this seems to me to be the consequence, not of any grand discovery by any individual, but of the continued use of a very easy method of extension, which, as far as I know, was first practised by Brodie, though very probably devised by some one else, and was probably suggested by the difficulty of applying and keeping applied the long splint in childhood. I may safely say that I never heard of Dr. Davis's name in connection with the matter.

With regard to the value of motion in combination with extension in the treatment of diseases of the joints, I should very much like, if possible, to obtain some trustworthy evidence. Sayre's splint, as it is called (though the invention of this also is claimed by Dr. Davis or some other American surgeon), has been known and used in this country for a great number of years. I think it must be over fifteen years since I first used it at the Hospital for Sick Children. Some years afterwards, when Dr. Sayre visited England, he spoke so confidently about the benefits of the apparatus, that it was much more extensively used, and, since that time, I believe, has been always procurable at the chief instrument-makers'. Yet I cannot meet with anyone who continues to use it. My own experience of it has been that, though it seems to answer at first, and often sufficiently for the purpose of a temporary display, so that a child who has been quite unable to move is thereby enabled to walk a few steps easily, yet afterwards it does harm by becoming displaced, and so allowing painful and injurious contact and movement of one bone on the other. I am speaking now, of course, of cases in which the disease is really in an active stage, and not of such as those of Mr. Adams's patient, who was free from pain before the instrument was applied. In a case recently under my care, I thought I could trace the exacerbation of the symptoms leading to abscess in the joint to the use of Sayre's splint. The fact is, that we want much more definite accounts of cases, extending over a considerable period of time, before we can say whether such treatment does harm or good, and whether it prevents or favours ankylosis.—I am, yours, etc.,

T. HOLMES.

London, January 14th, 1878.

THE PREVENTION OF HYDROPHOBIA.

SIR,—Will you allow me to ask the attention of your readers to a suggestion, which has, I think, some practical bearing on the prevention of hydrophobia? Would it not be well, in crowded communities like ours, where dogs are but little needed for the chase, to compel, by law, the removal of the canine teeth? The small number of dogs in which these teeth are required for special purposes might be exempted. It is the formidable canine tooth which, in nine bites out of ten, does the damage; without it, few dogs would be able to bite through clothing, for instance, and, in their attacks on each other, they would probably usually fail to break the skin. There would be but little suffering involved in the extraction, and the dogs themselves would be great gainers, not only in the diminished risk of rabies, but also in that they would not inflict on each other nearly so much pain in their ordinary quarrels.—I am, sir, yours, etc.,

JONATHAN HUTCHINSON.

15, Cavendish Square, W., January 22nd, 1878.

ASSOCIATION INTELLIGENCE.

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.

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.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

A SPECIAL general meeting will be held in the Queen's College on Thursday, January 31st, 1878. The Chair will be taken at 4 o'clock P.M.

Business.—"To consider the position of the profession in reference to the establishment of Provident Dispensaries in Birmingham", and to adopt such resolutions on the subject as the meeting may deem advisable.

JAMES SAWYER, M.D., }
EDWARD MALINS, M.D., } *Hon. Secretaries.*

Birmingham, January 24th, 1878.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.—Friday, January 18th, 1878.

Intemperance.—The Earl of CORK, in the absence of the Duke of Westminster, moved the appointment of a Select Committee for the purpose of inquiring into the prevalence of habits of intemperance, and into the manner in which those habits had been affected by recent legislation and other causes.

Monday, January 21st.

Intemperance.—The following peers were appointed as the Select Committee on intemperance: The Lord Archbishop of Canterbury, the Lord Archbishop of York, the Duke of Westminster, the Earl of Shaftesbury, the Earl of Belmore, the Earl of Onslow, the Earl of Morley, the Earl of Dudley, the Earl of Kimberley, the Earl of Aberdeen, the Earl of Donoughmore, the Lord Bishop of Peterborough, the Lord Bishop of Exeter, the Lord Bishop of Carlisle, Lord Henniker, Lord Penrhyn, Lord Aberdare, Lord Cottesloe.

HOUSE OF COMMONS.

NOTICES.—The following notices have been given.

Colonel Beresford: To ask the Secretary of State for the Home Department whether he will use his influence to postpone the consideration of the Bill promoted by the Metropolitan Board of Works for the purchase of the Water Companies, at a cost of many millions sterling, until that Board have, in accordance with the spirit of his recent reply to the Board, taken the necessary steps to prevent the recurrence of floods on the Surrey side of the water.—(Monday, January 28th.)

Mr. Edward Howard: Select Committee to inquire into the supply of water to the manufacturing districts of Lancashire and the West of Yorkshire, and any deficiencies likely to arise therein; and whether it is necessary or expedient to resort to the Westmorland and Cumberland Lakes to make good any deficiencies in such supply; and, if so, to what extent, and under what conditions, such resort should be sanctioned.—(Tuesday, January 29th.)

BILLS.—The following Bills have been introduced during the past week.

To consolidate and amend the Law relating to Factories and Workshops; brought in by Mr. Secretary Cross and Sir H. Selwin-Ibbetson; to be read a second time on January 24th.

To amend the Medical Act (1858); brought in by Dr. Lush, Sir Trevor Lawrence, Mr. Samuda, and Mr. Ritchie.

To facilitate the Control and Cure of Habitual Drunkards; brought in by Dr. Cameron, Mr. Clare Read, Mr. Ashley, Sir H. Jackson, Mr. E. Jenkins, Mr. W. Holmes, and Mr. R. Smyth; to be read a second time on July 3rd.

To amend the Public Health Act (1875); brought in by Mr. A. Brown, Dr. Playfair, Mr. Ryder, and Mr. J. C. Cowen; to be read a second time on January 31st.

To consolidate and amend the Acts relating to Public Health in Ireland; brought in by Sir M. Hicks-Beach and Mr. Attorney-General for Ireland.

To amend the Law relating to County Infirmarys and to the Relief of the Poor in Ireland; brought in by Mr. Meldon, Mr. Shaw, and Mr. Errington; to be read a second time on May 15th.

For the repeal of the Contagious Diseases Acts, 1864, 1866, and 1869; brought in by Sir Harcourt Johnstone, Mr. Stansfeld, Mr. Whitbread, and Mr. Mundella; to be read a second time on May 22nd.

To amend the Law relating to Public Baths and Washhouses; brought in by Mr. Forsyth, Sir T. Chambers, Mr. Ritchie, and Colonel Beresford; to be read a second time on January 30th.

To make provision for the purchase by the Metropolitan Board of Works of the undertakings of the several Water Companies supplying

Water to the Metropolis, etc.; brought in by Sir J. McGarel-Hogg, Sir A. Lusk, Mr. Grantham, and Mr. Rodwell; referred to Examiners of Petitions on Private Bills.

To amend the Law relating to the Qualifications required for holding certain Medical Appointments; brought in by Mr. Errington, Mr. J. Maitland, and Mr. Blennerhassett.

To make provision for the more effective prevention of Cruelty to Animals; to be read a second time on July 10th.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE Great Berkhamstead Guardians and Rural Sanitary Authority have received the sanction of the Local Government Board to their borrowing a further sum of £1975, making altogether £2400, the estimated cost of a site and building for an infirmary for infectious and contagious diseases.

BROMYARD No. 1 DISTRICT.

WE have heard it said that some men are better than their creeds; but in some things, at least, our beliefs are better than our practice. We believe, or profess to believe, that our Acts of Parliament go forth clothed with authority; and that, as provided for by these Acts of Parliament, the districts of the Poor Law Medical Officers are such that they can be worked. But the case of No. 1 District, Bromyard Union, shows that the Act of Parliament on the subject of Poor Law Medical Districts is conveniently ignored. That district, it seems, has an area of 32,979 acres. Considerably more than double what the legislature thinks any man can reasonably be expected to work. Thus Parliament thinks, and has fixed the total acreage to be confided to the care of any one man, for medical purposes, at 15,000 acres; and that area, if fairly peopled, will tax the energies of any man to attend to properly. Yet here is a case in which the Board of Guardians of Bromyard thinks differently, and has given effect to its thinking by assigning as one medical district to one man considerably more than double that allowed by law. Can it really expect that it can be efficiently attended to? Meanwhile, we would suggest that the Local Government Board may fairly call upon it to show cause for its opinion; and, failing proper reason assigned, see that the law be carried out, and the district broken up into two, with a remainder of 2,979 acres towards the formation of a third. Then there might be some hope that the poor would be seen to. As it stands, these immense districts simply render Poor Law attendance a farce, because the distance to be traversed, over hilly roads, and often in bad weather, is prohibitory both of the pauper's sending and of the doctor's attending. In this particular district we think the poor are fortunate in having such an indefatigable medical attendant as Mr. Powell.

MILITARY AND NAVAL MEDICAL SERVICES.

THE ROYAL VICTORIA HOSPITAL AT NETLEY.

THE nomination of Colonel R. C. Stewart to be "Governor and Commandant of the Royal Victoria Hospital at Netley" was notified in the *Gazette* a few evenings ago. The appointment of an officer who was not long since adjutant-general of the Madras army to the command of a hospital seemed strange enough, on reading the announcement, and none the less so that the principal medical officer of the hospital, a surgeon-general, ranking as a major-general, and evidently a distinguished officer, as the decoration of the Bath has been conferred on him, might well seem to be the natural head of such an establishment, under the general officer commanding the district in which it is placed. The posting of combatant officers in local command of hospitals has the advantage of affording opportunities of patronage, and perhaps also of rendering a few additional commanding officers available in case of war for service of a more legitimate kind; but, after all, it seems a questionable mode of attaining such ends. Until, however, some reformer springs up who will undertake the laborious and unenviable task of mastering details of military economy, especially of studying the instances in which costly appointments exist for the sakes of the officers holding them, and not from any need of their employment, neither the numbers of such "fifth wheels", nor the money outlay for officering the army are likely to be much lessened.

OBITUARY.

C. M. THOMPSON, M.R.C.S.Eng., SEVENOAKS.

WE have to record the death of one of our oldest members, Mr. C. M. Thompson, who died, after a few days illness, at his residence at Sevenoaks, on January 14th, at the advanced age of 81.

He was the youngest son of the Rev. M. Thompson, rector of Mistley, Essex; received a good education at Dedham School; was apprenticed to his brother, then a practitioner at Manningtree; entered at St. Bartholomew's in 1814, and in 1817 became M.R.C.S. and L.S.A. He shortly afterwards settled at Westerham, and for nearly fifty years did a considerable practice, retiring from active work at the age of 70, to devote the evening of his life chiefly to works of benevolence and public usefulness.

A man of quick and ready penetration, of great energy and activity; of perfect self-reliance and confidence, based on accurate knowledge; of warm sympathies and charitable disposition, he was eminently calculated to fill and uphold the position of a country doctor; and, outside his strictly professional duties, was a powerful influence in all good work in his neighbourhood.

Mr. Thompson was an active member of the Association, and filled the office of President of the South-Eastern Branch twenty years ago. He was a skilful surgeon, and an accomplished practitioner; ever ready to accept all new aids in the treatment of disease, and retaining those he found to be true. His long experience dies with him; his only published work being some few interesting cases in the medical journals. His good qualities were warmly appreciated by his neighbours, who presented him with a handsome testimonial on his retirement, and showed him respect and attachment by attending in large numbers at his funeral.

JOHN LANG, M.D., SOUTHPORT.

DR. LANG, who was unfortunately killed by an explosion of gas at his residence in Southport on January 5th, was born at Accrington, where he received his early education. He afterwards entered at University College, London, where he filled the post of house-surgeon at the hospital. He became M.R.C.S. and L.S.A. in 1855, and took the degree of M.D. in 1864. After having qualified in London, he was for two years House Surgeon to the Manchester Infirmary. He then practised in Accrington for a few years with marked success; but, preferring a larger and more central field, he returned to Manchester, where he became surgeon to the Hospital for Sick Children; and for some years carried on a considerable practice. He removed to Southport ten years ago. Here he was appointed Honorary Medical Officer to the Convalescent Hospital and Sea Bathing Infirmary. He was chosen Medical Officer of Health for Birkdale, and was elected to a seat in the Town Council of Southport. He took an active interest in the improvement of the sanitary condition of Southport, and he had the satisfaction in time of seeing his views adopted.

Dr. Lang was a Vice-President of the Lancashire and Cheshire Branch of the British Medical Association, and took great interest in the meeting held last year in Manchester, and in the visit to Southport of a part of the members. He was interred in the family vault at St. James' Church, Accrington. The Mayor and Town Councillors of Southport, the members of the Birkdale Local Board, and many of his professional brethren and others attended the funeral, which was joined at Accrington by many old friends from a distance.

NATIONAL HOSPITAL FOR CONSUMPTION.—The annual meeting of the governors of this hospital was held on the 22nd instant, at the offices, 12, Pall Mall, under the presidency of Lieut.-Colonel Atherley. Letters were read from Viscount Eversley (the President), the Duke of Grafton, the Earl of Powis, etc., regretting their inability to attend. The report of the Board of Management stated that the institution, which is situated at Ventnor on account of the superior salubrity of its climate, having now been finally completed, the whole one hundred and two bedrooms were occupied by patients. The number of patients had greatly increased, the mortality being only five per cent. The sum of £9,256 : 19 : 10 had been received during the past year; and on the 31st of December last there remained only £103 : 16 : 4 in hand towards the present year's expenses, after allowing for liabilities due. The Earl of Carnarvon will take the chair at the biennial dinner to be held at Willis's Rooms on the 20th of February next; and the Board rely mainly on the subscriptions then received to maintain the institution, there being no endowment. Votes of thanks to the officers and to the chairman brought the proceedings to a close.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, January 17th, 1878.

Deakin, James, Sole, Manchester
Lambert, John Speare, St. Leonard's Crescent, Exeter
Pearce, John Puckey, Biscovy Par, Cornwall
Thomas, David Edward, Cumumman, Carmarthenshire

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the ordinary monthly examination meetings of the College, held on Tuesday, Wednesday, and Thursday, January 8th, 9th, and 10th, 1878, the following candidates were successful.—For the Licences to practise Medicine and Midwifery.

Aherne, John Leonard
Armstrong, Henry
Arthur, Thomas Francis
Barker, Annie Reay
MacLigan, Bartholomew
Redmond, Joseph Michael
Spowart, William Ribton

For the Licence to practise Medicine.

Owen, Richard Foster

Roe, Arthur Legge

For the Licence to practise Midwifery.

Woodroffe, John Fitzhenry

MEDICAL VACANCIES.

THE following vacancies are announced:—

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.

LIMERICK UNION.—Resident Medical Officer of the Workhouse. Salary, £200 a year, with apartments, rations, etc. Applications up to the 30th instant.

LIVERPOOL ROYAL SOUTHERN HOSPITAL.—Two Honorary Surgeons. Election in February. For particulars, apply to Honorary Treasurer.

LOUGHBOROUGH DISPENSARY and INFIRMARY.—Resident House-Surgeon. Salary, 100 guineas per annum, with furnished rooms, fire, lighting, and attendance. Applications to be made on or before the 26th instant.

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.

QUEEN'S UNIVERSITY IN IRELAND.—Examiners for 1878 in the following subjects, at the salaries stated. Medicine, £100; Surgery, £100; Midwifery, £75; Materia Medica, £75; Medical Jurisprudence, £75. Applications to be addressed to the Secretary, at Dublin Castle, up to the 15th February.

RADCLIFFE INFIRMARY, Oxford.—Surgeon. Applications to be made on or before the 29th instant.

ROYAL FREE HOSPITAL, Gray's Inn Road.—Two Junior Resident Medical Officers. Applications on or before the 30th instant.

MEDICAL APPOINTMENTS.

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

ABBOTT, C. E., M.R.C.S.E., appointed House-Surgeon to the Liverpool Infirmary for Children, *vice* R. Clapp, L.R.C.P., resigned.

BARR, James, M.B., appointed Assistant-Physician to the Stanley Hospital, Liverpool.

DAVIES, Hugh Walter, M.R.C.S.Eng., appointed Surgeon to the Memorial Hospital, Jarrow-on-Tyne.

LLOYD, Edward J., M.D., appointed Medical Officer to the Normal College, Bangor, *vice* Lewis Jones, L.R.C.P.Ed., deceased.

*MURPHY, James, B.A., M.D., appointed to the Chair of Botany in Durham University College of Medicine, Newcastle-upon-Tyne.

*STOWERS, James H., M.D., appointed Physician to the St. John's Hospital for Diseases of the Skin, Leicester Square.

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.

BIRTHS.

FOX.—On January 22nd, at Clarence Street, Victoria Park, Manchester, the wife of Dacre Fox, F.R.C.S.E., of a son.

HARVEY.—On January 21st, at South Petherton, Somerset, the wife of *Walter A. Harvey, M.B., of a son.

DEATH.

DAWSON.—On January 21st, at Hunmanby, Henry Lawrie, infant son of *Dr. Dawson, aged 8 months.

VACCINATION.—Mr. J. W. Harrison has received a grant of £100 : 12 for efficient vaccination in his district, No. 1, Ecclesall Union, Sheffield. This is the third gratuity which he has received.

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. Dr. Leared, "Death in Typhoid Fever averted by the free use of Stimulants"; Dr. Dowse, "On Hereditary Syphilis as it affects the Brain and Nervous System".

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

CORRESPONDENTS, who wish notice to be taken of their communications, should authenticate them with their names—of course not necessarily for publication.

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.

THE "MEDICAL DIGEST".

DR. NEALE, of 60, Boundary Road, St. John's Wood, the author of the *Medical Digest*, writes to say that he proposes to issue a list of errata with the last volume of the New Sydenham Society for 1877, so that all the members may be able to correct their own copies, and will be obliged for any notes which may be sent to him of such errors. The *Medical Digest* was compiled in the midst of busy practice in a distant colony, which certainly increases the merit of the author, and explains some of the deficiencies to which we pointed in our notice of the book.

SIR,—I beg to state, in answer to "Inquirer" in your last issue, that Mr. John Bowie, 98, Lauriston Place, prepares gentlemen for the examination of the College of Physicians, Edinburgh.—I am, sir, yours truly, L.R.C.P.E.

MEDICAL ETIQUETTE.

SIR,—I am somewhat glad that we have made a step forward at last, and that Dr. Beresford has admitted that the radius was well and thoroughly united, and could not have been bent or in any way interfered with by his manipulation, and also that the ulna was uninjured opposite the fracture of the radius. Will he now go on, without introducing any further irrelevant matter, to describe what he found wrong about the arm, what he did to remedy it, and how he did it?

What Dr. Beresford says about my letters requires no answer from me: the letters are before the readers of the *JOURNAL*, and they will judge for themselves; but about the certificate which he mentions, and which was written by Mr. Wood, and signed by him and Messrs Harries and Davies a few days after the Shrewsbury examination, I will just say it was intended for the managers of the colliery and not for the profession, but that it shall be forthcoming in my final statement.

I am sorry, sir, that we have occupied so much time and space, but I hope Dr. Beresford will now make a plain statement as to what was done for the man Morris in the Oswestry Cottage Hospital, and say what he has to say about the arm, and then I will reply at once.—I am, sir, yours very obediently, W. H. Box. Chirk, North Wales, January 20th, 1878.

FILTERS.

R,—Would you kindly tell me the best description of filter to get for home use, just to filter a gallon or two of water daily—one easy to keep clean and in order?—am, your obedient servant, J. BURROWS.

****** Two very excellent filters are the Bischoff filter and the Silicated Carbon Filter.

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.

DR. DRYSDALE AND THE POPULATION QUESTION.

WE deeply regret to see the reports of a meeting at Notting Hill, at which Dr. Drysdale addressed an assemblage of mixed constitution on the population question, in company with Mrs. Besant. During a speech of upwards of an hour, he urged the "limitation of families" as a method of restraint upon population. Such doctrines are contrary to the purity of thought and manliness of life which are the characteristics of this nation. Dr. Drysdale's doctrines are wholly discountenanced by the medical profession; and we only mention this painful subject in order to utter a protest, lest by passing over the public aberrations and the course which that sincere but misguided physician is pursuing in this matter, it should meet with anything else than general disapprobation. In expressing that disapproval, we believe we are expressing the almost unanimous opinion of the profession in this country. The promulgation of such doctrines is not only mischievous but degrading, and we earnestly hope that Dr. Drysdale will, in his future public course in this matter, be guided rather by what is unquestionably the general feeling of his profession than by his own mistaken impulse.

DIPHTHERIA.

SIR,—In reply to Dr. Semple's letter in the *JOURNAL* of the 19th instant, I would say I believe that I clearly comprehend the views expressed by Dr. George Johnson and himself on the subject of diphtheria, membranous croup, and acute catarrhal laryngitis. In my communication in the *JOURNAL* of the 12th instant, the word "croup" referred to membranous croup; and in speaking of croup and diphtheria being the same, I meant that they had the same origin, and were the same disease, without reference to the part attacked. I would now ask your indulgence to enter into the subject a little more fully. A particular specific blood-poison, when introduced into the system, gives rise, among other symptoms, to the formation of a peculiar membranous product, generally situated on the tonsils or upper portions of the air-passages. Now, after some years of observation, I am inclined to think that this same blood-poison may affect the system and yet the membrane not be produced. I regard the blood-poison as the essence of the malady, and look upon the membrane as a product and a symptom, and, as such, subject to variations and modifications. During diphtheria epidemics, I have frequently observed that the appearances on the tonsils, etc., of persons members of the same household, and suffering from the complaint at the same time, have varied in every degree; some having perfectly formed pellicles, while others would have a few specks, or only have the parts covered with what is usually described as glairy mucus, but which, I think, may be allied in composition to the fibrin of which the membranes are formed, some circumstance preventing it from concreting. I have further observed that the pellicles often become detached at a very early period. Applying these considerations to the larynx and trachea, why may not diphtheria in these positions be subject to the modifications found in more visible parts? and how would it be possible to draw a distinction between such modified cases with a specific origin and cases of so-called acute catarrhal laryngitis, supposed to have been caused by cold? I am somewhat sceptical as to how far cold, *per se*, is liable to produce catarrhal symptoms, attended with fever. In places where there are cases of diphtheria, colds (as they are called) are apt to become epidemic; whereas, with a much lower temperature and no diphtheria, the general health may in all respects be good; and if certain atmospheric conditions favour the spread of disease-germs, it is probable that those of diphtheria would be no exception. The amount of mortality depends upon the conditions of exudation, and these again upon the systemic affection: the amount of mortality is therefore a secondary result, and hardly to be relied upon in making a differential diagnosis.—I am, etc.

Southam, February 21st, 1878.

WALTER LATTEY.

SIR,—Under this heading, Mr. Lattey kindly draws my attention to a point upon which I had not commented in the communication printed in the *JOURNAL* of the 5th instant. As I intended simply to record a method of treatment, the point raised as to the distinction between "simple acute" and "specific" inflammation of the larynx is obviously a side issue; at the same time, I am glad of an opportunity of stating my impression that diphtheria, croup, and catarrhal laryngitis cannot be considered manifestations of the same blood-poison. In only one of these (diphtheria) can there be said to exist any blood-poisoning beyond that due to impeded respiration. I am further of opinion that all blood-poisoning is a consequence, not a cause, of the intensity of an affection—as, for instance, in vaccinia, in puerperal septicæmia; and further still, in the acute specific contagious diseases—order, Miasmatici (Aitken)—such as small-pox, scarlatina, measles, and so forth.

To specialise and point out the distinction between simple acute inflammation of the larynx and trachea (laryngo-tracheitis, "croup") and "specific" inflammation of the same (diphtheria), I should say that the former tends to a mucopurulent, perhaps somewhat tenacious, secretion, whilst the latter is characterised by the formation of a distinct coherent membrane on the mucous membrane of air-passages, cesophagus, and so forth. This membrane is not always to be detected during life; and as the symptoms in both cases are somewhat the same (especially amongst children and in the early stages), a satisfactory diagnosis cannot in all cases be arrived at until some progress has been made in the disease. It is obvious, under these circumstances, that treatment applicable to the one is not necessarily equally efficacious with the other.—I am, sir, yours very truly, J. MAUNSELL.

Sheffield Road, Barnsley, Yorkshire, January 16th, 1878.

SORE NIPPLES.

SIR,—A patient of mine, who suffered much after her last confinement from sore nipples, is anxious that the recurrence of her trouble shall be prevented. I shall feel obliged if any of your readers will suggest a good application to use now and during lactation. She is in her sixth month.—I am, etc., E. R. S.

DR. THOMAS S. PORRY (Chester).—Personally, we sympathise with our correspondent; but as the matter is one on which there exists a marked division of opinion, not unaccompanied by heated feeling, and as an official decision has been taken, it is better to avoid fruitless discussion.