

skin and outgrowths between the skin surfaces somewhat like condylomata, though dry and scaly. In the right axilla is a pink cauliflower mass which discharges a fetid, straw-coloured fluid. It has round it a black circle of pigment, but otherwise is unpigmented. On first sight this growth looks like an ulcerating scirrhus, but on closer examination is seen to be in the skin, and not glandular. The bend of the elbow is pigmented, but few warts are visible in this situation. There are many on the hands, wrists, and fingers, while the skin between the latter is hypertrophied, and shows a dry, very typical scaliness. The feeling of the skin is very peculiar, it gives a sensation like that caused by rubbing rough textured plush velvet. The nails are dry, brittle, uneven, and cracked transversely.

On the abdomen the pigmentation is less well marked; but some of the darkest specimens of pigmentation may be seen round the gluteal region and natal fold, where there are good examples of pseudo-condylomata. There is also pigmentation on the front of the legs, and hypertrophied, scaly skin behind the knees. The state of the feet resembled that of the hands, though there were fewer warts. The iron-grey, scanty hair is short and dry, and almost as stiff as bristles.



THE MUCOUS MEMBRANES.

The tongue is dry, rough, and deeply furrowed, its mucous membrane and the soft palate of an orange tint and covered with outgrowths of the size of mustard seeds. The lips, deeply fissured, show a well-marked brown line at the junction of the skin and mucous membrane. In the pubic region, over which the hair has undergone changes of the

same kind as elsewhere, there are a certain number of warts, and the lesser nymphæ are somewhat hypertrophied, but the chief feature is the fetid leucorrhœal discharge.

THE VISCERA.

The viscera reveal on examination no evidence of cancer or other abnormality, and the patient's appetite is fair. The urine shows no excess of pigment. The blood has been examined on several occasions, and at early examination a certain degree of lymphocytosis was indicated by the blood count; on all others it has been that of an ordinary healthy person.

HISTOLOGY OF THE SKIN.

Microscopically the skin shows papillomata with a connective tissue core and a covering of stratified epithelium, and there is no tendency whatever for the epidermis to invade the underlying corium. The connective tissue is made up of fibrillæ with spindle-shaped cells. The tissues are well organized, and there is no round-celled infiltration. Scattered throughout it are discrete brownish quantities of pigment, mainly intercellular in position. The Malpighian layer of the epidermis is of normal thickness, but a few of its cells are pigmented. The basal layer is uniformly pigmented, and forms a well-marked line of demarcation between the epidermis and the cutis. There is so much pigment in the cells of this layer as to obscure the nuclei. The horny layer is thick, and when stained with hæmatoxylin and eosin appears light blue, whereas normal keratinized layer stains a deep red.

TREATMENT.

Numerous drugs were used without avail, but at last a combination of potass. iodidi gr. x and syr. trifolium (Parke Davis) 3ij, thrice daily, furnished good results. The dose was gradually increased up to 30 grains of the iodide of potassium and 3ss of the trifolium syrup. There was a gradual decrease in the size of the growths, especially marked in the case of the axillary tumour. However, at the end of ten months the improvement stopped, and a large cauliflower growth appeared in the left axilla, similar in size and appearance to that which was first observed in the right armpit; it was, however, much more darkly pigmented. Recently, calcium iodide gr. xv and salol gr. x once daily have been administered, ½ oz. of Epsom salts being given every third morning with the idea of removing any fermentation from the intestinal canal. This appears to have brought about a cessation of the progress of the disease, there being no increase in the papillomatosis or in the pigmentation. But although the condition appeared to become stationary, no other improvement can be recorded. Indeed, at the present time, the patient is on the whole losing ground. Her spirits are not as good as formerly, and increase in the pigmentation is recommencing.

GENERAL OBSERVATIONS.

With regard to the disease in general, the authors consider that both its etiology and its pathology are at present quite obscure. Cases completed by *post-mortem* examination are few, and none of the theories put forward by various authors apply equally to all the recorded cases. Women suffer more frequently than men, in the proportion of ten to three. The majority of cases are in people over 40 years of age, though instances of the disease in children as young as 7, and even 2 years old, have been noted. Abdominal cancer is held by some authors to be nearly always an associated factor. Traumatism of the abdominal sympathetic system has also been suggested as a cause, and by others exposure to extremes of heat and cold has been held accountable. In the authors' own case hyperchlorhydria was the only prodroma. Apart from the rarity of the condition, diagnosis is not difficult; the only condition for which it might be mistaken is Darier's disease, or keratosis vegetans, in which the enlarged papillæ are quite different in appearance from the warty growths of acanthosis nigricans. Moreover, in Darier's disease the skin dryness is absent and the pigmentation less marked. Although the cases often last a long time, the prognosis must be regarded as bad, and there is no drug on which dependence can be placed for a cure. Apart from the treatment of symptoms and observance of general hygienic principles nothing can be done. The authors concluded their paper with the following bibliographic references:

- Crocker: *Clin. Soc. Trans.*, xix, 1881; *Diseases of Skin*, vol. 1, p. 45.
 Darier: *Annales de Dermatol. et de Syph.*, 1895, vol. vi.
 Guérault: *Étât actuel de la question acanthosis nigricans*, 1893.
 Janowski: *Mécl. Chir.*, xi.
 Morris: *Diseases of Skin*, ed. 1904, ch. xxiii; *Medico-Chirurg. Trans.*, vol. lxxvii; *ibid.*, third series, vol. vi.
 Pollitzer: *Internat. Atlas f. selten Hautkrankheiten*, No. x.
 Unna (Norman Walker translation).

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

THE PREVENTIVE TREATMENT OF PUERPERAL ECLAMPSIA.

I BELIEVE the toxæmia in this disease to be of an acid character, from the success of the following treatment in twelve consecutive cases of albuminuria, varying in quantity from a half to fifteen-sixteenths of the total amount of the urine secreted; in one, my last case, I could actually turn the test tube on to its side without the contents leaving the tube, so thick was the deposit upon boiling and the addition of nitric acid.

I examine the urine in all cases of pregnancy at the seventh month. If this is not done, my experience has been to be called in when the patient is in convulsions, or, if the convulsive attack has temporarily passed off, when she is in a state of unconsciousness, from which, even with

the best consultative aid, the patient, in 50 per cent. of the cases, dies some time after delivery of the child without regaining consciousness.

If upon examination albumen is found, I order the patient to bed immediately, and keep her there until after confinement. The diet is principally milk; all other nitrogenous diet is forbidden. The preventive treatment is the use of potassium acetate (a neutral salt which becomes alkaline when taken) in sufficient doses to keep the urine alkaline.

My test of this is to boil the urine, and, if I get no deposit of albumen, I add nitric acid, and, if I then get a deposit of albumen, I keep the urine in this state. I then examine the urine every three days until labour sets in. From my experience of twelve consecutive cases, no convulsions will occur during labour or after delivery of the child.

The potassium acetate does not cure the patient of her albuminuria—in fact, in many cases does not reduce the albumen at all—but it does prevent eclampsia.

I have not found it of any use in cases in which convulsions have actually begun, labour having set in, even if the patient recovers consciousness sufficiently to take the medicine.

Wolverhampton.

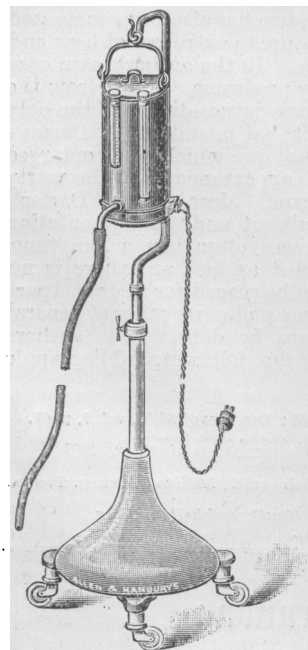
ALEX. MILNE BANKIER, M.D.

NOTE ON CONTINUOUS PROCTOCLYSIS.

Not the least important of the many good things which have come from America is the plan of the continuous administration of warm saline solution by the rectum, introduced by Dr. J. B. Murphy. This method of treatment is, in my opinion, one of the greatest advances in abdominal surgery which has been made within recent years. Its routine adoption leads, I believe, to more rapid

and certainly to more comfortable convalescence after coeliotomy, and its beneficial effects in cases of general septic peritonitis would have surprised me had I not been prepared for them by hearing from Dr. Murphy's own lips of the wonderful results which he has obtained in the treatment of this serious condition since the adoption of the practice of continuous proctoclysis.

Success in using the Murphy method depends on attention to detail, and the two most important points are, first, the regulation of the flow from the supply can by gravity alone, and not by constriction of the delivery tube; and, secondly, the maintenance of the saline at a constant and appropriate temperature. To obviate the latter difficulty, I have had an apparatus made which does away with the necessity



for constant supervision. It consists of an electroplated douche can which holds about five pints. In the front of the can are a thermometer and a gauge glass, and the can is graduated in half-pints, so that the amount of saline entering the rectum can be readily estimated. The saline leaves the can through a delivery tube with a half-inch bore, to which is attached three feet of rubber tubing connected with a large rectal tube. Under the bottom of the can is an electric heater, which can be connected with any electric supply of suitable voltage by means of a flexible cord and wall plug. The can is suspended on an adjustable stand mounted on castors so that it can be readily wheeled up to the bedside. I have found by experiment that with a ward temperature of from 65° to 70° F. the solution in the can must be kept at a uniform temperature of 106° F. in order to ensure that the saline enters the rectum at a

temperature of from 99° to 100° F. The electric heater is so made that if the saline solution is put into the can at a temperature of 106° F., the temperature remains almost constant so long as the current is switched on. The apparatus, which has been made for me by Messrs. Allen and Hanburys, can be left for several hours without any attention.

London, W. HERBERT J. PATERSON, M.B.,
B.C.Cantab., F.R.C.S.

SOAMIN (SODIUM PARA-AMINOPHENYLARSONATE) IN SYPHILIS.

ONE or two points of interest in regard to the action of a drug which is still on its trial is my excuse for bringing the following case to the notice of your readers.

J. B., aged 24, came to me in the end of 1908, having contracted syphilis three years previously. He consulted me concerning acute sloughing of his penis. The organ had been eaten away to within 2 in. of the pubis. Around the stump the skin was deeply ulcerated and the central portion embracing the urethra was one dark gangrenous slough. There was a copious, foul-smelling pustular discharge from the wound. I administered internally and locally the usual antisyphilitic remedies, but without improvement. By the end of February, 1909, the penis had disappeared and the stump was level with the pubis. The ulceration had spread somewhat over the scrotum. I stopped the treatment and proceeded to try soamin. I injected into the gluteal muscle 5 grains of soamin every alternate evening until 50 grains had been administered. I then increased the dose to 7½ grains every alternate evening until 120 grains had been given. The progress of the disease was just perceptibly slowed, but not being well pleased with the result, I put the patient on large doses of iron iodide and discontinued the soamin. A month later, in spite of the iodide, the disease showed signs of a fresh and more active lease of life. There was by this time a circular area of ulceration (taking the urethra as the centre) of from 2 to 3 in. in the suprapubic region of the abdominal wall and also over the scrotum. I then resumed the injection of soamin, beginning with 10 grains every alternate evening. An improvement was at once apparent, and, when 50 grains had been injected, healing of the ulcerated surface took place most rapidly from the scrotum upwards. By the time 100 grains had been administered the whole surface was completely filled up, firm, and solid, and has since remained so. On the second occasion 160 grains in all were given.

May I draw attention to the following points?

1. The dose of 5 grains or even 7½ grains was incapable of influencing the disease to any great extent, but the contrast was most marked and most rapid on adopting 10 grains.

2. In the literature on soamin that I have come across the value of the drug has been chiefly shown in syphilis in its earlier manifestations, especially in ulcerations of the mucous membrane of the mouth and throat. The case here recorded was a virulent type in the later stage uninfluenced by the usual antiluetic remedies.

3. With regard to the toxicity. There were no unpleasant symptoms during the first course of the treatment. But on resuming with 10 grains as the dose, after 50 grains had been given the patient complained of pain in his legs, especially in the back of his thighs and calves. This pain was limited to the days following each injection. The injection was usually administered about 8 p.m., and within eight or nine hours after each injection, that is, about 5 a.m., he suffered from severe epigastric pain and a feeling of nausea which passed off usually in about six hours.

After 70 grains had been given, on a further injection of 10 grains, he within an hour became faint and giddy, then cold and collapsed, and was obliged to lie down for several hours. On the reduction of the dose to 7½ grains no further untoward effects ensued.

Queen's Park, Manchester.

ALEX. FRASER, M.D., C.M.

THE Emperor of Japan has conferred on Dr. Brander, of Fort William, the Sixth Order of the Sacred Treasure. After the Japanese-Chinese war Dr. Brander was also decorated by the late Emperor of China with the Third Order of the Double Dragon for distinguished medical services to the Chinese wounded soldiers from Korea.

would refuse to condense into rain unless there were particles of dust to form nuclei, so would ideas before taking shape seem to require a nucleus of solid fact around which they could condense. Most people required to tackle some definite difficulty before their minds developed whatever powers they might possess. This was true even of the youngest, and the moral to be drawn was that an endeavour should be made to make education as little bookish and as practical and concrete as possible. It was possible to read books and to pass examinations without the higher qualities of the mind being called into play, but it was not possible for boys to make boats or for girls to cook dinners without using their brains.

Similarly, it was the need for thought and action which gave to research an educative value, even in the case of those who did not intend to become professional men of science. In the same connexion the speaker advocated interchange of students among the universities of the empire. There should be a recognition of each other's examinations, residence, and degrees. He did not mean that all universities in one country should be under one government, for he was a strong believer of the individuality of universities, but such individuality was in nowise inconsistent with the policy of an open door from one university to every other in the empire.

The Structure of Matter.

Dealing with the problems of the future, the speaker pointed out that considerable progress had been made in the task of discovering the structure of electricity. It was known that negative electricity was made up of units all of the same kind; that they could be obtained from all substances; that in point of size they were no greater than $\frac{1}{1000}$ part of the mass of an atom of hydrogen; and that with suitable conditions they moved with enormous speed, approaching that of light. On the other hand, comparatively little was known about positive electricity, but on the whole it seemed likely that it would eventually be proved that a unit of positive electricity was quite different to a negative corpuscle, and in point of size equal to an atom of hydrogen. A knowledge of the mass and size of the two units of electricity would afford material for constructing a molecular theory of electricity which would be a starting point for a theory of the construction of matter. As a provisional hypothesis, the most natural view to take was that matter was merely a collection of positive and negative units of electricity, and that the forces which held atoms and molecules together, the properties which differentiated one kind of matter from another, all had their origin in the electrical force exerted by positive and negative units of electricity, grouped together in different ways in the atoms of the different elements.

Sources of Energy.

Since the energy associated with a given charge varied inversely as the size of the body on which this was concentrated, the energy stored up in the negative corpuscle must be far greater than that stored up by a positive unit. The amount of energy stored up in ordinary matter in the form of the electrostatic potential energy of its corpuscles was not generally realized. All substances gave out corpuscles, and it might be assumed that each atom of the substance contained at least one corpuscle. On this supposition he calculated that the potential energy of a gram of hydrogen equalled seven times the heat developed by one gram of radium or by the burning of five tons of coal. Thus even ordinary matter contained enormous stores of energy kept fast bound by the electrical corpuscles. This was fortunate, for if an appreciable fraction at any time got free the earth would explode and become a gaseous nebula.

Such matter, however, formed but an insignificant fraction of the universe, mere islands in the great ocean of ether, which was not a fantastic creation of the speculative philosopher, but as essential as the air we breathe. It transmitted the energy of the sun, which practically did all the work of the world, and it must contain something which, like ordinary matter, could store up energy in addition to much other work.

The Age of the World.

The nature of radium and radiation was also discussed; alpha rays had been shown by Rutherford to be positively electrified atoms of helium, moving at about one-tenth of

the speed of light; beta rays were negatively electrified corpuscles, moving at nearly the velocity of light; and gamma rays were unelectrified, and analogous to the Roentgen rays. One special significance of the discovery of radio-active bodies was in relation to the age of the earth. The discovery had annihilated one method of calculating this age, but had supplied another, namely, by measuring the amount of helium given out by all radio-active bodies. On this basis the age both of particular rocks and of the crusts of the earth could be calculated, and the total age of the earth shown to be more than twice as much as that at which Lord Kelvin had previously estimated it, namely, about a million years.

Finally, said Sir Joseph Thomson, recent discoveries in physics and potentialities suggested by them had had an effect upon progress of science akin to that produced in literature by the Renaissance. Enthusiasm had been quickened, and there was a hopeful, youthful spirit abroad, which led men to make with confidence experiments which would have been thought fantastic twenty years ago. As peak after peak was conquered, regions full of interest and beauty were seen, and in the distance still higher peaks, which would yield to those who ascended them still wider prospects and deepen the feeling, whose truth was emphasized by every advance in science, that "Great are the works of the Lord."

Medical News.

DR. E. ARTHUR DANDO has been appointed by the Lord Chancellor to be a Justice of the Peace for the Borough of Dudley.

THE Imperial Cancer Research Fund has received a donation of £1,000 from the Duke of Bedford to meet an overdraft at its bankers.

THE seventieth birthday of Duke Karl Theodor of Bavaria was celebrated at his castle of Possenhofen on August 9th. The duke, in spite of advancing years, still maintains his Ophthalmological Clinic at Munich.

THE plans of the new Examination Hall of the Royal colleges in London have yet to be settled, but preparation of the new site in Queen Square, Bloomsbury, is to be taken in hand forthwith. The houses which the two Colleges have jointly acquired are on the west side of the square, close to the Alexandra Hospital for Hip Disease, and nearly facing the opening of Great Ormond Street.

THE Local Government Board has granted an application from the Stoke-on-Trent Town Council for permission to include ophthalmia neonatorum among the diseases notifiable within its area. The new Order will come into operation in the district on August 28th, and remain in force for twelve months. Other sanitary authorities in the pottery district are taking steps towards the same end.

A TELEGRAM to the *Times* announces that the report of the International Opium Commission which sat in Shanghai in February last was issued there on August 24th. It consists of two volumes, the first containing minutes of the transactions, and the second reports put in by the delegates regarding opium legislation in the various countries represented, and statistics relating to opium growing, the opium habit, the opium trade, and the revenue derived from opium culture or trade, together with the international agreements respecting traffic in the drug.

IT was recently announced that the Orient Line had granted free first-class tickets between Australia and England to selected scholars of the Australian universities, and the three first nominations have now been made by the Chancellor of the Sydney University. Messrs. H. J. Swain, Science Research Scholar, S. G. Lusby, Barker Mathematical Scholar, and H. K. Archdale, Woolley Classical and Philosophical Scholar, the three gentlemen selected, will travel to England by the Orient Line R.M.S. *Omrah*.

THE asylums committee of the Surrey County Council has addressed a circular letter to boards of guardians in the county stating that provision has been made to receive, on and after September 1st, some 36 paying patients from the county of Surrey at the new County Lunatic Asylum at Netherne, Merstham, at rates from 25s. a head a week. It is believed that this course will check the number of patients claiming admission to the asylum as paupers, and the committee suggests that boards of guardians should carefully inquire into the financial position of all patients, with a view to preventing further abuse of the accommodation provided for the pauper class.

DELAYED CHLOROFORM POISONING.

At an inquest on August 24th on a child aged 14 which died in the Royal Free Hospital, the cause of death was stated by the medical witness to be delayed chloroform poisoning. The child underwent an operation on August 16th, being anaesthetized by a mixture of which chloroform formed a part. Three days later she became delirious and afterwards comatose, and remained in this condition until her death on August 21st.

COMPENSATION CASE: FEE FOR CONSULTATION.

A. K. writes: I have been attending a woman who was injured in a bus accident and is claiming damages from the bus company. One morning I received a letter from the company's doctor asking me to meet him at the case that afternoon. I had no time to arrange previously about the payment of my fee, but did as he requested. Am I not right in claiming a special fee for this interview, and, as it was at the request of their doctor that I went, in holding the bus company responsible for its payment?

* * It appears to us that, in the circumstances, no fee is due to our correspondent from the company. The request of the medical officer was probably made out of consideration for the medical etiquette of the matter. A fee is due from the patient to the medical attendant, as his presence at the consultation may properly be taken to be in the interests of the patient.

Universities and Colleges.

SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have been approved in the subjects indicated:

SURGERY.—*H. S. Brown, *J. A. Byrne, *J. P. Henderson, *B. A. Keats, *S. K. Poole, *B. Robertshaw, *S. H. Scott, *T. A. F. Tyrrell, *A. Whitby, *F. H. P. Wills.
MEDICINE.—*H. S. Brown, *J. M. Burke, *J. A. Byrne, *J. P. Henderson, *G. Holmes, *W. E. North-Smith, *G. Tate.
FORENSIC MEDICINE.—*J. A. Byrne, *A. C. Dickson, *C. S. Foster, *J. P. Henderson, *H. R. Ibbotson, *B. W. Loewenberg, *J. K. Nariman, *G. Tate.
MIDWIFERY.—*J. P. Henderson, *C. P. A. de L. Persira, *G. Tate, *C. J. Thompson.

* Section I.

Section II.

The diploma of the Society has been granted to Messrs. J. A. Byrne, J. P. Henderson, B. A. Keats, and F. H. P. Wills.

Obituary.

WILLIAM BROWN, F.R.C.S.E.,

CONSULTING MEDICAL OFFICER OF HEALTH FOR CARLISLE.

MR. WILLIAM BROWN, who for twenty-five years and until his retirement last year was Medical Officer of Health for Carlisle, died at his residence at Craiglockhart, Edinburgh, last month. Mr. Brown, who was born at Wintershields, received his medical education at the University of Edinburgh; he obtained the diploma of M.R.C.S.Eng. in 1872, and seventeen years later was admitted a Fellow of the Royal College of Surgeons of Edinburgh. In 1873 he became L.R.C.P. Edin., and shortly afterwards was appointed House-Surgeon to the Cumberland Infirmary. A year later he took over the practice of his elder brother, the late Mr. Robert Brown, of Carlisle, who had been incapacitated by illness. He assisted the late Dr. Elliot in his work as medical officer of health, and succeeded him upon his death in 1883. Last year, the town council having decided to appoint a medical officer of health to devote the whole of his time to the duties of the office, Mr. Brown retired and was appointed Consulting Medical Officer for a period of four years. Soon after his appointment as medical officer of health he called special attention to the insanitary condition of certain private slaughterhouses, and to the existence of a virulent form of typhoid fever in their neighbourhood; as a result a public slaughterhouse was erected in 1887, and the private slaughterhouses abolished. He also brought about the abolition of ashpits and pigsties in the town with resulting great improvement in the health of the city, especially in respect of typhoid fever. More than twenty years ago Mr. Brown studied the subject of the infection of milk by tuberculous cattle, and the importance of milk as a vehicle for typhoid fever. On his advice the Health Committee instituted systematic inspection of dairy cattle within the city, and the notification of tuberculous disease in man. He gave valuable evidence before the Royal

Commission on Tuberculosis in 1897, and in many other ways took an active part in the advance of sanitary science. When the annual meeting of the British Medical Association was held in Carlisle in 1896 he was a Vice-President of the Section of Public Medicine. But he did not confine himself to this branch of medicine, and achieved considerable distinction not only as a general surgeon, but also in ophthalmology. He gave an interesting demonstration of cases before the Section of Ophthalmology in 1896. He was a Fellow of the Royal Microscopical Society, and at one time President of the Carlisle Microscopical Society.

He was a man of unassuming disposition, and all who knew him, either as medical officer of health or in his capacity as a private practitioner, formed a high opinion of his abilities and disinterestedness.

THE death is announced of Mr. ROBERT G. COOMBE, formerly of Burnham, Essex, in his 92nd year. Mr. Coombe was admitted a Member of the Royal College of Surgeons in 1841, and was elected a Fellow in recognition of his high professional attainments in 1884.

DR. OTTO V. BOLLINGER, Professor of Pathological Anatomy in the University of Munich, died on August 13th, after a short illness. Professor Bollinger, who was in his 67th year, made many contributions to the knowledge of the etiology of actinomycosis, tuberculosis and cardiac hypertrophy, and to the causes and phenomena of meat poisoning. He joined the staff of the *Muenchener medizinische Wochenschrift* in 1879, and the eminent position which that periodical has now attained was largely due to his energy and ability. He took a great interest in questions affecting the social welfare of the profession, and was particularly active in promoting the local society for providing pensions for the widows and orphans of medical men.

Public Health

AND

POOR LAW MEDICAL SERVICES.

CERTIFICATE OF SUFFICIENT WATER SUPPLY.

J. P.—When the owner of a newly-built house in a rural district applies, in accordance with Section 6 of the Public Health (Water) Act, 1878, for a certificate that there is a sufficient water supply, the application is made to, and the certificate is obtained from, the sanitary authority, and not from the medical officer of health. The owner of the house cannot be called upon to pay a fee either to the sanitary authority or to the medical officer of health.

DISPENSARY FOR POOR LAW PATIENTS.

DELTA writes: Is a district medical officer living within his own district in a large provincial town in England at liberty to open a surgery or dispensary within that district for the purpose solely of his Poor Law patients?

* * The objection to such a course would be that the guardians might fear it was part of a plan to differentiate between pauper and other patients—a differentiation which might extend further. If this objection be waived, there must be many Poor Law districts where a central surgery at which the pauper patients might attend would be a great convenience to them.

AT an inquest on a baby on August 24th, Dr. Waldo, the Coroner for Southwark, drew attention to the dangers involved by the Government stamp on secret remedies. These stamps, in his experience, did a great deal of harm, because poor and ignorant mothers and other persons thought that the medicine must be good because it bore a Government stamp. It was true that the words "no Government guarantee" appeared on the labels, but it was often in small type, and many of the persons who used these remedies overlooked these words, or could not read them. The Government received £240,000 in one year from these stamps, and now, with a Free Trade Government in office, there ought to be a good opportunity for getting rid of them.