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 the Manager, at the Journal Office, 161A, Strand, London, and not to the Editor.

UNOUALIFIED PRACTICE.

UNQUALIFIED PRACTICE.

SIR,—Kindly give me your opinion on the following. A firm, whom we will call Messrs. Jumbo and Mumbo, open a dispensary, on the window of which they advertise their charges, etc., and over it their names "Jumbo and Mumbo, Surgeons". Jumbo is a qualified man, but a non-resident, and comes down to see patients. One day, however, a patient, who had been attended solely by Munbo dies somewhat abruptly before Jumbo has seen him, whereupon Mumbo writes and signs the certificate, but in Jumbo's name, who had never seen the deceased. The case is laid before the Registrar-General, who declines to take further notice of the matter on Mumbo promising not to do it again.

Meanwhile, a child dies in convulsions while under the care of Mumbo, and Jumbo writes to the registrar, saying that he might safely assign the death to whooping-cough. The registrar, however, not feeling satisfed, refers the matter to the coroner, and the coroner declines to interfere. The inference to be drawn is that Mumbo himself is unable legally to write certificates of cause of death; and, if so, why does he style himself surgeon over his door? I sthis fair in the interests

if so, why does he style himself surgeon over his door? Is this fair in the interests of the public or of the medical profession?—I am, sir, yours truly,

Pro Bone Publico.

PATHOLOGY IN THE UNIVERSITY OF GLASGOW.

SIR,—In the BRITISH MEDICAL JOURNAL for March 4th, it is stated, in your notice concerning the proposed Professorship of Pathology in the University of Glasgow, that, "Among the requirements for graduation, at the present time, general pathology is not a compulsory subject." This is a mistake. General pathology is a compulsory subject; and the examinations, oral and written, are thoroughly searching. "Volume the control of ing .- Yours, etc., A GLASGOW GRADUATE.

ARTIFICIAL HUMAN MILK.

ARTIFICIAL HUMAN MILK.

SIR,—Professor Frankland's plan—commended by Dr. Playfair—of treating cow's milk so as to render it almost identical with human milk, prescribes the use of "a piece of rennet about an inch square". May I ask some of your readers who are familiar with the process to explain what solid preparation of rennet they employ? Here, in America, the only thing discoverable of the sort is an imported solid pepsin (Merck's), which is of a gummy consistence, and which imparts an abominable smell and taste to the milk. I have for some time past been using, with excellent results, the dried pepsin (in small scales), enclosed in a cambric bag to facilitate its removal; but should like to learn what better form of rennet can be obtained.—I am, sir, faithfully yours. sir, faithfully yours,

New York, February 21st, 1882.

SCARLET FEVER.

SIR,—With the opinion held by Mr. Smith—mentioned by him, in the JOURNAL of January 28th—as to the rarity of a second attack of scarlet fever, and also as to the sore-throat of the "protected" being communicable to the "unprotected" as a true scarlet fever, my experience leads me entirely to agree. A year ago, this was very plainly shown in my own household—my three eldest girls had each at the same time an attack of scarlet fever. Last December twelve months, the eldest, aged 1x years, awoke on a Friday morning complaining of sore-throat and some fever; this was attributed to romping in the nursery the night before, she at that time appearing to be in perfect health. She was not confined to her room, but was some days before recovering: in fact, convalescence was somewhat protracted. My two appearing to be in perfect health. She was not confined to her room, but was some days before recovering; in fact, convalescence was somewhat protracted. My two youngest, a boy and a girl, both unprotected, remained apparently quite well and in excellent spirits until Sunday night. Three full days afterwards, the girl commencing during the Sunday night, the boy on Monday morning, they both had very grave attacks, the girl at one time being all but moribund. The disease afterwards spread to the grandmother, nurse, and housemaid, all of whom were unprotected, the two girls previously protected escaping.

From the history of this epidemic, I think none can doubt that the sore-throat of my eldest girl was the outcome of her having been exposed to the influence of the poison of scarlet fever, and that it was plainly the means of conveying it to the other children, the two latter having had no communication whatever with any other children than their sisters.—I am, etc.,

Sandycroft, Shaw, March 1st, 1852.

A CASE OF MEDICO-LEGAL INTEREST.

Str.—An incident has just occurred in my practice which, I think, presents some features of interest from a medico-legal point of view. Upon paying my ordinary morning visit to a patient, a delicate woman, I entered the room unannounced; and it at first seemed to me untenanted, but some indistinct choking sounds some reached my ear, and I discovered my patient lying half on and half off the sofa. reached my ear, and I discovered my patient lying half on and half off the sofa, I rushed forward to lift her up, and found some difficulty in doing so. Upon examination, I found the head, which was much congested, caught by some wraps (a piece of flannel covered by a piece of velvet), which were round the throat, in a projecting piece of the handle of a coal-scuttle. So tightly were the ligatures drawn by the action of this metal bar, that I had some difficulty in introducing two fingers between them and the neck, and dividing them with a bistoury. This being effected, the lady rapidly recovered, and I found that she was suffering from an epileptic attack—the first she ever had, to my knowledge, or of which I could get any account. A very evident mark was left by the bandages round the throat. Now, had not I or some other person entered in time to release the patient before life was extinct, and had she heer raised without notice taken of the agratting Now, had not I or some other person entered in time to release the patient beame life was extinct, and had she been raised without notice taken of the garotting action of the scuttle-handle, would not appearances have pointed to foul play, especially as it appears that there had been some trivial misunderstanding between my patient and her maid, who had just left the house before my visit?—I am, sir, yours faithfully,

A. COOPER KEY.

30, Wilton Place, February 23rd, 1882.

TAPEWORM IN THE INFANT.

SIR,—In answer to your correspondent, "A Member", who seeks information as to the most efficacious treatment of tapeworm in children, I would strongly recommend him to adopt the following plan of treatment. The child should not be allowed any food after five or six o'clock in the evening. It should have a dose of allowed any lood later live or six o'clock in the evening. It should have a dose of castor-oil at bedtime; and, early on the following morning, a draught composed as follows: Extracti filicis liquidi 3ss; mucilag. acaciæ 3ss; aquæ menthæ piper, ad 3ii, should be administered, followed by another dose of castor-oil in about three hours. This draught may require to be given two or three times; should it not succeed, oil of turpentine may be tried.—Yours truly,

HERBERT WRECHT, M.R.C.S., L.R.C.P., etc. 128, Cornwall Road, South Kensington, S.W., March 8th, 13fe.

SIR,—As my name has appeared for some time in the published circulars of one of the English societies for the abolition of compulsory vaccination, I wish to give notice that I have withdrawn from all societies of the kind, not because I disapprove of their objects, but because I think I will be more useful in a private capacity. I am also unwilling to take part in that portion of the agitation which might seem ungracious towards certain members of my own profession, from whom I differ in opinion upon this question, though I still continue to regard them with esteem as private individuals. After this notice, all such advertisements will be known to be without profession. private individuals. After this horice, an such austressment without my concurrence.—I am, sir, your obedient servant,
Edward Hauchton, M.D.

Spring Grove, Upper Norwood, S.E., March 11th, 1882.

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

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Antiseptic Surgery: its Principles, Practice, History, and Results. By W. W. Cheyne. London: Smith, Elder, and Co. 1881.

Science and Culture, and other Essays. By T. H. Huxley, F.R.S. London: Macmillan and Co. 1881.

Transactions of the Pathological Society. London: Smith, Elder, and Co. 1881. Essentials of Medicine. By Henry Hartshorne, A.M., M.D. London: Smith, Elder, and Co. 1881.

Sympathetic Diseases of the Eye. By L. Mauthner, M.D. New York: William Wood and Co. 1881.

Medical Ophthalmoscopy. By W. R. Gowers, M.D. London: J. and A. Churchill.

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chester; Dr. Joseph Rogers, London; etc.

The Opium Question. By J. M. Hays. London: J. and A. Churchill. 1882. Scrofula and its Gland-Diseases. By F. Treves, F.R.C.S. London: Smith, Elder.

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