

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.

THE DUBLIN COLLEGES AND THE TITLE OF DOCTOR.

SIR,—I would be much obliged by your letting me know if I am entitled to put "Doctor" before my name (on visiting cards, etc.), being a L.R.C.S.I. and L.K.Q.C.P.I.—Yours faithfully,
E. R. MULOCK, Surgeon R.N.

* * The following is a copy of the official reply of the King and Queen's College of Physicians to all questions similar to that made by our correspondent:

"College Hall, Kildare Street, Dublin. Sir,—In reply to your queries, I beg to inform you that, in the opinion of the College, a licentiate is not entitled, legally, to call himself 'Doctor,' or to use the letters 'M.D.' in virtue of being a licentiate of this College.—I am, sir, your obedient servant, J. MAGEE FINNY, M.D., Fellow and Registrar."

CONVALESCENT HOMES FOR SCARLET FEVER.

SIR,—May I be allowed to point out that, in his remarks on the above subject in the JOURNAL of April 22nd, Mr. Hume has gone somewhat wide of the mark? In London, at any rate, the "wants of the poorer classes" in respect of hospital accommodation for "fever" patients, are already fairly well provided for; and the "child of a working man," to whose case Mr. Hume refers, might have been removed to hospital, and probably would have been, had the illness been reported to the district medical officer of health. What is wanted is, a workable system of "notification of infectious diseases," backed by increased powers of compulsory removal to hospital, where the patient cannot be properly isolated at home. Had Mr. Hume's first patient been removed to hospital, prompt disinfection might have preserved the others from attack; but there is nothing in his communication to indicate that the illness has ever come to the knowledge of the sanitary authority. In any event, however, I take it that "convalescent homes" are not intended for such cases as the above; and, therefore, Mr. Hume's illustration is scarcely *à propos*.—I am, sir, yours faithfully,
T. ORME DUDFIELD, M.D.

Town Hall, Kensington, April 22nd, 1882.

NEPHROTOMY AND NEPHRECTOMY.

SIR,—Permit me to correct an error which occurs in your report of some remarks I made upon this subject at the recent meeting of the Clinical Society. I am described as "struck with the extreme harmlessness of nephrectomy and nephrotomy." This is very far from true. The report would have correctly described my meaning if it had read, "the extreme harmlessness of nephrotomy as compared with nephrectomy." I ventured to point out the unnecessary risk entailed in subjecting a patient to so severe an operation as excision of the kidney, without previously giving the chance of recovery by such a comparatively harmless procedure as incision into the diseased organ.—Yours faithfully,
F. A. MAHOMED.

CONSULTATIONS WITH HOMOEOPATHS.

SIR,—Can you allow me a small space in your valuable JOURNAL to ask a question concerning consultations with medical men practising homoeopathy? In the JOURNAL of April 22nd (page 597), it is stated that "Dr. Rees Philipps then placed before the Committee of Council the views of the South-Western Branch on homoeopathy. It was moved and seconded 'that, as it has been resolved by the annual meeting of 1852, and reaffirmed by the annual meetings of 1858 and 1861, that 'there are three classes of practitioners who ought not to be members of the Association viz.: (1) real homoeopathic practitioners; (2) those who practise homoeopathy in combination with other systems of treatment; (3) those who, under various pretences, meet in consultation or hold professional intercourse with those who practise homoeopathy,' it be an instruction to the Committee of Council to request [a member stated to be practising homoeopathy at Plymouth] to withdraw his name from the list of members of the Association.'"

It is with regard to the third of the above mentioned classes that I wish to ask a question.

On July 10th, 1873, I was called in by a solicitor, to examine a Mr. A., a gentleman who possessed considerable property, with a view to ascertaining whether he was or was not mentally capable of making a will. I visited the patient three times. On the first occasion, I met a medical man practising homoeopathy in the East End of London, who was the patient's family physician. I had a long consultation with this gentleman concerning the state of mind of our patient; but neither of us made any allusion to the bodily condition of the patient, nor to the medical treatment which was being pursued in his case. I was much assisted in my diagnosis by the medical man in question, who had been for some years attending the patient.

At that time expressed an opinion in writing that the patient was capable of making a will. In 1875, this gentleman died, leaving his property to a Mrs. B., the landlady of his lodgings, who had acted as sick nurse to him during the last few years of his life, to the exclusion of his wife. On November 26th, 1875, Mrs. A. disputed this will, and the case was compromised, two-thirds of the property going to the landlady, and one-third to the wife.

I wish to ascertain (1) whether or no I was justified in entering into a consultation with a homoeopath, such consultation relating only to the mental condition and legal aspect of the case, and not to the medical treatment; and (2) if a similar case should present itself, whether or no I should be justified in again entering into such a consultation, provided that no question of treatment be touched upon, and that only the psychological and medico-legal points of the case are brought under discussion. I ought, perhaps, to mention that I found out subsequently that the homoeopathic physician was treating the patient with gum-arabic for diarrhoea.—Apologising for the length of this letter, I am, your obedient servant,
Richmond Terrace, Whitehall.
HENRY SUTHERLAND.

USE OF STEAM FOR HEATING HOSPITAL WARDS.

SIR,—Permit me to correct a statement made by Dr. Jacob in your last issue, relative to our new steam-boilers. It is quite true we erected two steam-boilers and one hot-water boiler at the period which he names, but they were to replace others worn out. We have always done our washing, drying, mangling, and a portion of the cooking, with steam. The boilers were made a little larger, with a view of introducing steam for heating purposes instead of hot water. We only work one steam-boiler at a time, excepting in very cold weather. I need scarcely say that a steam-boiler does not require any greater skill in stoking than that of an ordinary hot-water boiler.

If we were to heat the same surface with hot water, we should spend at least £150 a year more in coal and wages, and the result would then be unsatisfactory.

—I am, sir, your obedient servant,
THOMAS BLAIR, General Manager.
The General Infirmary at Leeds, April 18th, 1882.

SPASM.

SIR,—In the JOURNAL for April 1st, "Spasm" says his patient has muscular cramps and loss of sexual power. He says he has inquired into every function, but allow me to suggest that he has to deal with a case of albuminuria. Should he find it so, he will oblige by communicating that fact to the JOURNAL, or to yours sincerely,
CLIFSON WRAY, M.D., M.R.C.S.

Skegness, Lincolnshire.

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BOOKS, ETC., RECEIVED.

Notes on Surgical Treatment. By T. F. Hopgood. London: Baillière, Tindall, and Cox. 1882.

A Study of the Tumours of the Bladder. By Alex. W. Stein, M.D. New York: Wm. Wood and Co. 1881.

A Hand-Book of House-Sanitation. By E. F. Bailey-Denton, C.E., B.A. Oxon. London: E. and F. N. Spon. 1882.

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