

CREMATION.

SIR.—In a letter dated April 22nd, 1874, from Regent's Park Barracks, in the *Medical Times and Gazette*, I ventured to observe with regard to the happy sanitary idea of cremation, so ably suggested by Sir Henry Thompson, that it did not require very deep thought "to see in cremation the forerunner of many a Lucrezia Borgia."

As a complete safeguard against this most serious and glaring possibility, I perceive the Council of a society calling themselves "The Cremation Society of England," state that "a certificate must be sent in by one qualified medical man at least who attended the deceased until the time of death, unhesitatingly stating that the cause of death was natural, and what that cause was." I fail to see much difference in this certificate from the usual one given by every medical man, yet cases have occurred where exhumation has proved the death unnatural.

We will suppose, for instance, that a man wished to poison his wife by slow poison, and that he managed to pick a quarrel with her usual medical attendant, discharged him, and in a week after she died, having been seen by another qualified medical man up to the hour of her death, he being under the impression that her case was misunderstood by her usual medical adviser. Again, would there not be considerable touting for names to be placed on the company's books, for those who wished to be cremated? Cremation, in my opinion, to be legal, must entail in every case a most perfect *post mortem* examination; and, until such is established, I trust the legislature will hold it illegal, and abolish all attempts at it in this country.—Yours respectfully,

COSMO G. LOGIE, M.D., late Royal Horse Guards.

47, Queensborough Terrace, Kensington Gardens, March 23rd, 1884.

THE INDIAN MEDICAL GAZETTE.

SIR.—Through the medium of the BRITISH MEDICAL JOURNAL, I should like to bring to notice the fact that its admirable contemporary, the *Indian Medical Gazette*, is characterised by its absence in most of the medical libraries in England. I feel sure the *Indian Medical Gazette* only requires to be known, and its perusal would be appreciated by the frequenters of these libraries, many of whom are interested in the professional work carried on in and peculiar to India.—Yours obediently,

ALEX. FAULKNER, I.M.D.

London, March 30th, 1884.

MODEL BOOTS.

DR. MATTHEWS (Waterloo) forwards us samples of a model boot for children, made of the shape now fortunately no longer unfamiliar, though but little adopted by bootmakers, viz., the shape of the natural foot. These model boots are made by Messrs. Cook and Townshend of Byrom Street, Liverpool. They are sensible and humane, and there are many who will be glad to know that these model boots of natural form are kept ready-made for children at popular prices.

INCOMPATIBILITY OF IODIDE OF POTASSIUM AND QUININE.

SIR.—With reference to the observation of Dr. Rabuteau regarding the incompatibility of iodine and quinine, noted in your JOURNAL, page 242, a reference to Section 402:2 of the *Medical Digest* will show that the late Dr. Fuller was fully aware of the fact, and communicated a suggestive paper to the *Lancet* upon the subject.—Obediently yours,

RICHARD NEALE, M.D. Lond.

60, Boundary Road, South Hampstead, S.W.

MOLLUSCUM FIBROSUM.

SIR.—Common as are the little fibrous tumours of the above disease, and frequently through their situation as they characterise the individual, they seldom present themselves for treatment. The sons of toll retain them as a birthright, and are, as a body, sceptical of the promises of surgery held out for their relief. In these days, to make a wound is often to excite an erythema, and, in the presence of pigment, the young surgeon is cautioned against well known risks in their removal; still, much may be done for them. It is when fibromata are prominently placed, as on the face or neck, and when they occur in ladies or young people of personal comeliness or fashionable tastes, that treatment is solicited. They are either spherical or oblong, and occur in large numbers when small, and, when single, are occasionally large (I have seen one of the size of a walnut hanging from the lobe of the ear). As usually met with, they vary in size from a pin's head to a bean, or even a hazel-nut, and they are, except when situated over a nerve, painless. It is to Virchow that we are mostly indebted for a description of them. Rokitsky calls the affection "Mollusum simplex," and ascribes its presence to "a heaping up of embryonic connective tissue-cells, and bulging forwards of the corium." Two cases, in which the patients were sisters, each possessing a high degree of intelligence, and "moving in good society," have lately come under my care; in neither was there a history of arrest of development. In the first the tumour was single, of the size of a pea, smooth, firm, and sessile, and situated at the root of the nose. In the second case, there were no fewer than seven of these homoplasms placed on the side of the nose, the cheek, the chin, and the angle of the mouth; and this last, where, through local activity, they are often larger, is a very common place to find them. Some were soft, but most of them firm in consistence. Two contained a varying amount of pigment, and one at least of capillaries. I removed the nodule in the first case by a transverse elliptical incision, extending somewhat beyond, and brought the edges together by a suture of very fine Japanese silk. Union took place immediately on removal of the suture. In the second case, two of the larger growths, of the size of a small grape, I similarly treated; three smaller ones, I submitted to the action of strong carbolic acid applied with a match; and two occupying an intermediate size, I treated with strong nitric acid, neutralising with carbonate of soda as soon as "blanching" had well set in. One application sufficed with nitric acid; a thick yellow, leathery slough giving place at the end of a fortnight to a circular white spot. Four applications of carbolic acid were needed, and the effect was a slightly pigmented stain. Excision left a faint linear cicatrix. After the initial treatment, the spots were covered over with discs of pink court-plaster, and flexible collodion painted on for a variable distance, so as not to restrict the patient's liberty, and to guard against ensuing "redness." The rude method of snipping off these little lumps with scissors is neither a strictly surgical proceeding, nor productive of good results. Arising from the subcutaneous layer, the growths consisted of dense greyish white fibres, and a few embryonic cells. No capsule could be traced, and the epidermic layer was detached with difficulty. One of them was soft, and contained, in addition, fat-cells, capillaries, loose fibrous tissue, and some pigment. No central duct was observed. There was an absence of sebum, and, superficially, no umbilication. The use of strong tincture of perchloride of iron, where vascularity prevails, not unfrequently gives rise to much irritation.—I am, sir, faithfully yours,

HERBERT A. SMITH, M.R.C.S. Eng., L.R.C.P., L.S.A.

THE VALUE OF VACCINATION.

SIR.—The following case, corroborating as it does the cases given by Mr. Buchanan in the BRITISH MEDICAL JOURNAL of March 8th, is worth recording.

On February 23rd, I was called to see A. R., aged 24, unvaccinated, and found him suffering from small-pox. I had him removed to the Borough Hospital, where he died on March 4th. The family consisted of father, mother, two brothers, and two sisters, besides the one sent away—the children all over twenty years old, and unvaccinated. I revaccinated the father, and vaccinated the rest, excepting the mother, who had small-pox some years ago. The vaccine took well.

One brother, who had slept with deceased up to the time of his going away, was taken ill on March 5th with all the premonitory symptoms of small-pox. On the 8th, there appeared the usual eruption of pimples, which, however, did not go on to suppuration, and had quite disappeared on March 14th; showing, I think, very clearly in this case the good effects of vaccination, even if done after infection has taken place.

No other member of the family has been at all affected.—Yours truly,

J. P. BRADLEY, F.R.C.S. Ed.

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

Mr. R. Trotter, Perth; Dr. J. Smyth, Naas; Dr. J. T. Faulkner, Stretford, Lancashire; Mr. F. A. Cox, Dublin; Dr. Moore, Dublin; Mr. G. A. Hawkins, Ambler, Liverpool; Mr. S. Farmer, Chorley; Mr. W. L'Heureux Blenkarne, Buckingham; Mr. F. C. Wallis, London; Mr. Lawson Tait, Birmingham; The Secretary of the South Wales and Monmouthshire Branch; Our Glasgow Correspondent; Mr. Shirley Murphy, London; Dr. David Drummond, Newcastle-on-Tyne; Mr. E. Luckman, Bowdon; Mr. H. J. Manning, Salisbury; Our Dublin Correspondent; The Secretary of the Royal Medical and Chirurgical Society, London; Our Edinburgh Correspondent; Mr. R. J. H. Scott, Bath; Mr. G. S. Brady, Sunderland; Our Paris Correspondent; Mr. C. Spurway, Rome; Mr. J. Vesey Fitzgerald, London; Mr. J. Startin, London; Mr. D. W. Richards, Birmingham; Mr. R. D. R. Sweeting, London; Our Aberdeen Correspondent; Sir Edmund Lechmere, London; Messrs. Lebon and Co., London; Mr. J. Smith, Belfast; Mr. T. W. Wholey, London; Dr. Sheen, Cardiff; Dr. Kelly, Taunton; Dr. Davison, Southbourne-on-Sea; Mr. William Graham, Middleton; Mr. John Giles, Cuxton; Dr. Ward Cousins, Southsea; Mr. H. G. Davies, London; Our Birmingham Correspondent; Mr. Richard Jeffreys, Chesterfield; Dr. S. W. Smith, Pershore; Mr. William Jones, Wrexham; Dr. John Topham, London; Dr. A. Wahlteuch, Hulme, Manchester; Dr. James McNaught, Bookfold; Dr. Collingridge, Greenwich; Dr. Robertson, Kimberley; Mr. D. H. Menzies, Glasgow; Mr. H. O. H. McDougall, Winchester; Dr. Norman Kerr, London; Dr. Styrap, Shrewsbury; Mr. N. Lambert, London; Dr. C. E. Prior, Bedford; The Secretary of the National Medical Association for Repeal of the Contagious Diseases Acts; Dr. R. Leslie, London; Mr. J. L. Clifford Smith, London; Sir T. Spencer Wells, London; Dr. J. Hughlings Jackson, London; Mr. J. E. Lane, London; Mr. W. J. Spencer, Bradford; Mr. J. Alexander, Paignton; Mr. J. L. Steven, Glasgow; Dr. W. White, Hadfield, Manchester; Mr. W. Barker, London; Dr. Joseph Rogers, London; Mr. B. Jones, Leigh, Lancashire; Mr. A. R. Adams, Madras; Mr. J. McGregor Robertson, Glasgow; Mr. J. H. Swirn, Allahabad; Dr. Gibson, Edinburgh; Mr. J. L. Jardine, Capel, Surrey; Mr. H. P. Hobson, London; Mr. J. Moloney, Colonoey, co. Sligo; Our Belfast Correspondent; Messrs. Mellin, London; Dr. C. Cameron, Dublin; Mr. H. P. Leech, Bury St. Edmunds; Mr. W. Bates, Wimbledon; The Right Hon. the Lord Mayor, M.P., London; Mr. J. G. Douglas Kerr, Bath; Dr. Patrick Manson, London; Dr. D. W. Buxton, London; Our Manchester Correspondent, etc.

BOOKS, ETC., RECEIVED.

Ambulance Handbook for Volunteers and Others. By J. A. Raye, L.K.Q.C.P. London: J. and A. Churchill. 1884.

On the Treatment of Spinal Curvatures. By H. Macnaughton Jones. London: J. and A. Churchill. 1884.

Anatomy of the Inguinal and Femoral Regions. By E. L'E. Ledwich. Dublin: Fannin and Co. London: Baillière, Tindall, and Cox. 1884.

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