NOTICES of Births, Marriages, Deaths, and Appointments, intended for insertion in the BRITISH MEDICAL JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.

TREATMENT OF PHTHISICAL COUGH.

SIR,—I would be very much obliged to any member of the Association who would suggest to me a suitable treatment for a phthisical cough, when morphia, opium, hyoscyamus, cannabis Indica, in various combinations, have been tried, but with little success in moderating the cough, which is of a very severe nature. Strapping the chest has also failed. The case is a very chronic one; the symptoms, unless the cough, are very mild. It is but right to say that morphia with acid has proved most effectual, but it soon does away with all the patient's appetite.—Yours, etc.,

TACKLES AND DRAGS.

TACKLES AND DRAGS.

SIR,—Will you do me the favour to inform me, through the JOURNAL, what is the most approved form of tackle or drag for rescuing helpless persons from the water, while in the act of bathing, such persons being of course naked, and having, therefore, nothing to which hooks or other similar contrivances can be attached? Has the Royal Humane Society any such apparatus? Where could it be had? And what is the cost? A bather gets out of his depth, and becomes exhausted, or is seized with cramp and rendered helpless; how can he be best rescued from his imminent danger by means of mechanical appliances? I shall be greatly obliged by full answers.—I am, sir, faithfully yours,

Morecambe, June 19th, 1880.

* We forwarded this query to the Secretary of the Royal Humane Society, who

** We forwarded this query to the Secretary of the Royal Humane Society, who has kindly replied as follows.

"Royal Humane Society, Offices, 4, Trafalgar Square, W.C., June 22nd, 1880.

"SIR,—I have the pleasure of sending you a description of the life-saving apparatus required by the writer of the enclosed letter.

"The ordinary pole drag for bathers has blunt flukes, and is better adapted than the other where there are no clothes to catch by.

"We have our drags made by Mr. Dunham of Whitefriars Docks. Life-buoys and hand-lines for rescuing skaters are made by Messrs. Birt of Dock Street, London Docks.—Yours faithfully,

"The pole drag is made of light, but strong, iron, and fixed with a socket to a pole sixteen feet long. These drags are supplied to all the Society's stations, and are used to drag for and reach to any person who may have become immersed; they are very useful. The rope drag is made somewhat like a boat's anchor, of strong iron, with hooks at the end of each arm, and a long rope at both ends, so as to readily pull it in either direction. This drag is used for water that is too deep for the pole drag. The cork life-buoy is a circle of cork covered with canvas, and surrounded at the edge with cords to hang down, and which may be easily clutched by anyone in the water, and usually a long line is also attached to it, so as to pull in anyone to whom it may have been thrown."

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—If the "Member" from Cardiff, in

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—If the "Member" from Cardiff, in kindly sending corrections for the College of Surgeons Calendar, had added his name, he would have enabled the Secretary to thank him for those corrections.

name, he would have enabled the Secretary to thank him for those corrections.

VACCINATION AND MARKS.

SIR,—Your correspondent "G. P." has noticed an important objection of some moment, and "A Provincial Surgeon" has recently made some remarks also upon it in the JOURNAL. The subject is worthy of some decided views and scientific explanation; for whether one or two marks are of equal value with four, depends mainly upon (as I view it) the mode of vaccination. Doubtless this question has exercised the brain of many public vaccinators and medical men for and against for years, and few have ventured to combat the question of plurality of marks. The present site for vaccination is objected to by many parents, particularly in females, for obvious reasons, that it might disfigure the arm and be taken for other diseases. I have often known the present site to be most inconvenient. The little males, for obvious reasons, that it, might disfigure the arm and be taken for other diseases. I have often known the present site to be most inconvenient. The little clothes of children are not made wide enough generally, and it is a difficult place to make applications to on that account. With regard to the number of marks and the statements of Marson, they were probably correct when made. All persons believe so. But are the imperfect methods and observance of vaccination, indifferent as many But are the imperfect methods and observance of vaccination, indifferent as many may have been whether their children were vaccinated or not, or from what source, to be taken as of any value now? Were the vaccinations of those children from whom those statistics were tabulated all done by medical men or skilled vaccinators? Are we able to decide that the real vaccine vesicle was produced? I doubt it. Spose I make a mark four inches long, and insert sufficient lymph, so that the whole linear vesicle rises. Do you believe that one mark will be of no more value as a preventive measure than four puny insertions in distinct places on the arm! I put this in this manner for distinct explanation, because the assumption and advocacy of a certain number of marks, however small, providing they secure a vesicle, is pointed out as the acme of the preventive measures designed to fulfil the requirements of the Local Government Board. Now if one, two, three, four marks are so important, four more would be still more important; and if the former confers great immunity, twenty would confer greater. I believe, from long observation, that two good scratches, one inch long, well charged with lymph, will produce such a congeries of vesicles as will be as powerful and preventive as any four punctures; and further, the marks will occupy more area and show more distinct formation, and there can be no shadow of a doubt in my mind of the immunity conferred. Marson's statistics are obsolete for our present results. Again, are not marks delusive there can be no shadow of a doubt in my mind of the immunity conferred. Marson's statistics are obsolete for our present results. Again, are not marks delusive occasionally, and often due to postvaccinal inflammatory consequences? Many are purely of this character, and are not of the benign and true vaccine vesicle, but are designated vaccine marks nevertheless. Further, if the germ-theory be of any value, it must be taken into consideration. Dr. Beale pointed out the existence of "particules" in vaccine lymph; Chauveau and Burdon Sanderson also described them; Braidwood and Vacher confirmed their accuracy. The particulate nature of contagion is generally accepted as proven. It is presumably organic. This organic particle, if inserted into a susceptible individual, reproduces itself in a marvellous manner. Thus the vaccine virus is set forth as an exemplam of the contagium vivum and the model of other morbific processes having like reproductory powers in the living system. Then if a single germ be so active in its reproductory powers what must a number of germs be, inserted in one or two linear scratches one inch vivum and the model of other morbine processes naving have reproductory power, in the living system. Then if a single germ be so active in its reproductory power, what must a number of germs be, inserted in one or two linear scratches one inch long. I am led to believe from this reasoning that one or two (although I have always adopted the latter) good marks will confer the immunity desired, and as a vaccinator of many thousands who have passed through a small-pox epidemic of some magnitude, never yet knew a case to die or be marked of any consequence. I believe that the opinions advocated as to the plurality of marks cannot hold, and that two scratches one inch long, which I have invariably adopted, will stand the test as a preventive measure with any four punctures separately arranged, and hold more of the vaccine germs or particles which we desire to insert in the system.

—I am, etc.,

TEETOTAL PATIENTS.

TRETOTAL PATIENTS.

SIR,—I think the following case may be of use to some of my professional brethren. On the night of the 6th ultimo, I was requested to attend a lady some little distance out. I arrived about twelve o'clock, and found my patient in the second stage of natural labour. I stayed with her a short time, and then, at her request, I went down-stairs to the drawing-room, where I found the husband; he kindly asked me if I would have a bottle of "zoedone" or a cup of coffee. I said as I had never tasted zoedone, I preferred coffee; he informed me that they were all rigid "tee-totallers", they never kept intoxicating drinks in the house. After drinking my coffee, I went up to see how my patient was getting on; and found the head descending very nicely, and in about an hour the child was born. Immediately afterits birth, almost before I could separate it, my patient began to flood most violently. I applied pressure, cold, gave ergot, in fact did all that was usual: she became rest-less, insensible, cold extremities and blanched face, pulse almost imperceptible. I asked for brandy, and, to my great sorrow, was informed they had not a drop in the house. I immediately requested the husband to send the groom off to the nearest house or inn for some, which was about a mile and a quarter. After an hour or so, he returned with what he called two gills—about six ounces. I complained of the smallness of the quantity he brought; he said that was all he was requested to bring. My patient still flooding and insensible, I gave by a teaspoonful at a time all the brandy; and as I luckily had about an ounce of aromatic spirit of ammonia in my obstetric bag, which I had given her before the brandy arrived, helped to keep her alive. She rallied after taking the brandy; and, the hæmorrhage ceasing, I left her. Calling upon her as early as I could in the morning, I found my patient going on very well, and she made a rapid recovery.

My advice is, that if any of my medical friends are asked to attend such cases, always to be

A CIRCULAR.

The following circular has been forwarded to us. "Mr. Buller, Member of the Roya College of Surgeons of England, St. Columb Major. Mr. Buller having been solicited to practise at Wadebridge, has opened a surgery at Mr. Julian's, Molesworth Street, where he may be consulted every day from 10 to 12 o'clock. For the exclusive benefit of the labouring classes, Mr. Buller, will give advice and medicine at his surgery on the payment of two shillings each time."

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ansactions of the American Gynecological Society. Vol. iv. Boston: Houghton, Mifflin, and Co.

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