CAN BROMIDE OF IRON BE DANGEROUSLY POISONOUS?

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SIR,—On recommending the use of bromide of iron, my attention was called to a paragraph at page 612 of the National Dispensatory (Ed. 1879), as follows. "There is not the slightest evidence of its ever having been useful in medicine, and, as it is dangerously poisonous, it ought never to be used internally." Acting on the advice given in Naphey's Medical Therapeutics, page 27 (seventh edition), I have given it "in increasing doses, beginning with never less than five grains for a child, and running up the dose rapidly to twenty grains three times a day", with the best effects, and without any symptoms of poisoning.—Yours obediently.

SAMUEL S. D. Wells. SAMUEL S. D. WELLS.

Royal Naval Hospital, Haslar, November 28th, 1881.

A DOCTOR'S WIDOW.—As the child is beginning to walk, the case ought to be treated. Bandaging the foot carefully to a splint in the proper position would probably suffice.

probably suffice.

The Royal United Hospital, Bath.

Sir,—The recent election of surgeon to the Royal United Hospital, Bath, has led to some comments in the British Medical Journal of October 20th, as to the advisability of electing assistant physicians and surgeons to that institution. You say it "would inevitably lead to the development of a greatly increased outpatient departments; this, with the safeguard in force, viz., that no patient may come a second time without a note of recommendation, is very unlikely to happen. At present, the outpatients are supposed to be seen by the physicians and surgeons: present, the out-patients are supposed to be seen by the physicians and surgeons; but this has been done only in a very irregular manner, the great bulk of the work having been done by the house-surgeon, i.e., on the surgical side. The house-surgeon is elected annually, and is therefore often very young and inexperienced. Sometimes, as a matter of favour, he is re-elected for a second year; so, just as his opinion is becoming of some value, another takes his place; surely, this state of things is not satisfactory.

The appointment of officers for this work alone would have several advantages:

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In leading to the work being done in a more regular way, and would thus less often be left to the house-surgeon and students, and would thereby prove an advantage to the patients and students, and would add to the reputation of the hospital. It is not fair to the patients to be seen chiefly by the house-surgeon, an officer who is so constantly being changed, and one, therefore, who varies very much in his professional knowledge and abilities.

2. These junior appointments would have also the effect of training men to fill the notes of physicians and surgeons.

2. These junior appointments would have also the enert of training ment of methods of physicians and surgeons. At present, men are appointed surgeons without any surgical experience, beyond having been, perhaps, house-surgeon to the institution fifteen or twenty years previously, time enough for the best man to get out of practice and forget his surgery.

I am, etc., L.R.C.P.

Dr. A. Samelson's query has been forwarded to the Secretary of the Open Spaces Committee of the Kyrle Society, who will be able to afford him full information on

the subject.

Sudden Death.

An inquiry has been held into the death of John Douglas, a weaver, of Carlisle, aged 47, who died suddenly on Friday, November 25th. Dr. Walker, who made a post mortem examination of the body, found that there had been inflammation of all the serous membranes of the body. The left cavity of the heart and aorta were both filled with an organised clot, probably arising from inflammation of the internal membranes of the heart. This would impede the flow of the blood through the aorta. There was very little blood in the heart, and he did not think that the cause of death was the obstruction of blood through the main artery. Probably the heart, by the existence of this clot in the left ventricle was paralysed in its the heart, by the existence of this clot in the left ventricle, was paralysed in its action, and death would take place by fainting. He believed that the deceased died from natural causes. Other evidence was given, and the jury returned a verdict in accordance with the results of the post mortem examination. The coroner stated that, during the seven years he had acted as coroner for the city, this was only the third case of the kind that had come before him. It was rare that such a form of death came under his observation.

A QUESTION OF FEES. Sia,—Will you kindly advise me, through the medium of your paper, what I should charge for my attendance in the following case? At mid-day I received a telegram from an old patient of mine, a lieutenant-general, who was staying at Southsea, desiring me to see him immediately in consultation with his medical attendant there. I immediately went down, but was unable to return the same night. About a week later, I went down to Southsea, and brought him back with me to town. Southsea is about eighty-five miles from Kensington. The patient is dead. He has no relative. He has left a considerable amount of money. He was in the habit of paying me five shillings per visit. His executors want my bill, so I shall be glad of an early reply, under the pseudonym of

Cash.

LUMINOUS PAINT.

Sir,—It may interest some of your readers to learn that Balmain's luminous paint is quite a success as a means of making the "night bell" conspicuous. The plate of mine, which is about four inches in diameter, is distinctly visible at night at a distance of ten yards; and when one is close to it, it looks as if it were made of ground glass and a feeble light shining through.—Very truly yours,

Stourport, November 22nd, 1881.

G. F. M.

ATTENDANCE ON FAMILIES OF MEDICAL MEN.

Sir,—I think, with Dr. Blackburn, that this subject should be more accurately defined than at present, and that gratuitous services should be limited to the family chargeable upon a professional brother; in fact, to cases where the fees would come out of his own pocket. Surviving relatives enjoying an ample unearned income from real property are not entitled to accept such services without paying the usual fees.

usual fees.

Some years since, I attended for many months a retired Indian surgeon, well known to the profession, who was dependent upon my visiting him regularly at a fixed hour night and morning, in order to prevent his suffering the horrors of retention of urine. Upon no occasion did I fail to visit him at 10 P.M., in order to introduce the catheter. He specially stipulated that I should charge him fees, just as if he were not a medical man, inasmuch as he had surplus property, and every one for whom he cared was amply provided for. He died somewhat suddenly, and the relatives—persons who had neglected him and quarrelled with him while alive—took possession of everything, unceremoniously dismissed a faithful housekeeper on whom this aged gentleman had been greatly dependent, and, as to myself, though aware of the sacrifice of time and personal convenience at which my services had been rendered, they sent me, "as a present", a trumpery old silver lancetcase, and never even thanked me for my services. My present impression is, that were such a case to occur again, I should send in a claim in the usual way to the executors.—Faithfully yours, JAMES EDMUNDS.

xecutors.—Faithfully yours, Grafton Street, Piccadilly, November 12th, 1881.

- To Antivivisectors: The Last Resource.

 The Chicago Medical Review has the following. "A gentleman called to consult a physician in regard to a serious form of rheumatism. The latter wrote him a prea physician in regard to a serious form of rheumatism. The latter wrote him a prescription. As the patient was going away, the doctor called him back: 'By the way, sir, should my prescription afford you any relief, please let me know, as I am myself suffering from an affection similar to yours, and for twenty years have tried in vain to secure any relief.'"
- Dr. Cosgrave's "Skeleton Respirator" for antiseptic purposes is manufactured by John Whyte, No. 68, Upper Sackville Street, Dublin. It is silver-plated, and costs 5s. 6d.
- SIR,—I should be much obliged if anyone could inform me if there is any general account published of the life-history of bacteria and other organisms supposed to be connected with contagious diseases; or, if not, what are the best monographs on the various kinds, and where they are to be procured.—I am, etc., M.D.

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

Dr. Wolfe, Glasgow; Dr. Parsons, Dover; Dr. Wyekoff, Brooklyn; Dr. Stevenson, London; Mr. R. Slade, Puddletown; Mr. E. H. Roe, Patricroft; L.R.C.P.; Dr. Rabagliati, Bradford; Dr. Duncan J. Mackenzie, Glossop; Dr. Ashby, Manchester; Dr. Thomas, Swansea; Dr. J. K. Spender, Bath; Our Aberdeen Correspondent; Dr. Barnes, Carlisle; Dr. Ward Cousins, Southsea; Mr. C. R. Crane, London; Mr. Nettleship, London; Dr. S. Rees-Philipps, Exeter; Mr. Watson Cheyne, London; Dr. Clement Godson, London; Dr. R. Liveing, London; Mr. G. Cowell, London; Mr. A. E. Durham, London; Dr. R. Cory, London; Dr. Charlton Bastian, London; Dr. H. Simpson, Manchester; Mr. W. Whitehead, Manchester; Dr. Glynn, Liverpool; Dr. Dreschfeld, Manchester; Dr. Grainger Stewart, Edinburgh; Mr. W. H. Platt, London; Dr. A. Davidson, Liverpool; Dr. H. Kelly, Taunton; Dr. Herbert Vachell, Cardiff; Dr. L. Atthill, Dublin; Dr. J. S. Bristowe, London; Dr. William Murrell, London; Mr. Malcolm Morris, London; Dr. Eddison, Leeds; Mr. Bartleet, Birmingham; Dr. Braidwood, Liverpool: Dr. Macnaughton Jones, Cork; Mr. Shirley Murphy, London; Dr. U. Pritchard, London; Mr. John Croft, London; Dr. Duffey, Dublin; Mr. W. B. Dalby, London; Dr. McCall Anderson, Glasgow; Mr. Paul Swain, Plymouth; Mr. J. N. Porter, London; Dr. A. H. Jacob, Dublin; Mr. A. Newbold, Rhyl; Dr. T. Churton, Leeds; Mr. W. D. Newton, Exeter; Qui merui palmam ferat; Mr. S. D. Wells, Haslar; Mr. W. H. Browne, Hull; Mr. H. M. Kennedy, Penrith; Mr. W. Arnison Slater, London; Dr. Broadbent, London; Mr. W. Black Manchester; Dr. G. W. Potter, London; An Old Hospital Student; Mr. R. H. Micholson, London; Dr. W. A. Brailey, London; Dr. C. Harrison, Lincoln Mr. G. Stanger, Nottingham; Dr. W. Clibborn, Birmingham; Dr. Joseph Coats, Glasgow; Dr. Clement Dukes, Rugby; Mr. H. Lewis Jones, London; Dr. John Alexander, Glasgow; Dr. J. Lynham, Galway; Dr. Latham, Cambridge; etc.

BOOKS, ETC., RECEIVED.

A Practical Treatise on Hernia. By J. W. Warren, M.D. Second and Revised Edition, fully Illustrated. London: Sampson Low and Co. 1881.

The Wild Garden. By W. Robinson, F.L.S. London: Garden Office. 1881.

Kinetic Jottings, with Remarks. By Professor A. Georgii. London: H. Renshaw.

An Index of Surgery. By C. B. Keetley, F.R.C.S. London: Smith, Elder, and Со. 1881.

Monaco, the Beauty-Spot of the Riviera. By Dr. T. H. Pickering. London: Fleet Street Printing Works. 1881.

Good Things. Leeds: Goodall, Backhouse, and Co. 1881.

Ophthalmic and Otic Memoranda. By D. B. St. John Roosa, M.D. London:
Trübner and Co. 1881.

Cutaneous and Venereal Memoranda. By H. G. Piffard. London; Trübner and Со. 1881.

Eczema, and its Management. By L. D. Bulkley, M.D. London: J. and A.

Churchill. 1881.
Transactions of the Clinical Society. London: Longmans, Green, and Co. 1881. Outlines of Naval Hygiene. By J. D. Macdonald, M.D. London: Smith, Elder

Outlines of Naval Hygiene. By J. D. Macdonald, M.D. London: Smith, Elder and Co. 1881.

A Digest of the Law relating to Public Health. By G. F. Chambers, F.R.A.S. London: Stevens and Sons. 1831.

Thirty-Ninth Report to the Legislature of Massachusetts for the year ending December 31st, 1880. Boston. 1831. Convalescent Cookery. By Catherine Ryan. London: Chatto and Windus. 1881.

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