MEDICAL CERTIFICATES OF THE CAUSE OF DEATH.

MEDICAL CERTIFICATES OF THE CAUSE OF DEATH.

SIR,—Your suggestions to students on this subject in your last number (page 142) might be supplemented by pointing out the need of precision in filling up the certificates of the cause of death. In these days of thorough training at the medical schools, vague terms, such as blood-disease, bad leg, chill, cough, chest affection, ill from birth, water, fits, tabes, should not be found in the death register. It may be thought that certificates of this kind are found in out-of-the-way country districts only. It is not so; in cities and large towns, men with university degrees are as slovenly as their more obscure brethren. Some of the teachers even at our large medical schools set a bad example in this matter; and, when an operation is many cases given as to whether it is for disease or

large medical schools set a bad example in this matter; and, when an operation is performed, no information is in many cases given as to whether it is for disease or injury. Peritonitis, metritis, or pyaemia is often returned with no statement as to the primary cause—childbirth.

Can such certificates be given "to the best knowledge and belief" of the medical attendant? Let us hope the inaccuracy is due rather to carelessness than to ignorance. Medical officers of health especially should urge upon those practising in their districts the importance of greater preciseness in returning causes of death. GEORGE RENDLE.

-I am, sir, your obedient servant,

AN ADVERTISEMENT.

Sir,—I observe in your last issue that "A Member of the Bristol Branch" has been good enough to interest himself in myaffairs; and, if he will give me his real name and address (through you), I will endeavour to enlighten him generally (through the columns of the JOURNAL) upon the subject in which he appears to be engaged. But, if he should deem it wiser to remain incognite, he must pardon me for not condescending to notice his communication, further than designating his attack as cowardly, deceptive, and inconsistent; and, should I be fortunate enough to discover who my assailant is, I shall be particularly interested in ascertaining and social ethics un to which he professes. scrutinising the standard of professional and social ethics up to which he professes to teach and practise.

I have generally a reason for all that I do, say, or write; and I believe that I have a good one in connection with this, although it does not happen to be just what your correspondent has chosen to impute.—I am, sir, yours faithfully, Clifton, August 1st, 1882.

John Broom, M.D., etc.

CLINICAL THERMOMETERS.

CLINICAL THERMOMETERS.

SIR,—In reply to an inquiry lately made for information regarding clinical thermometers, I would answer, that a four-inch thermometer with indestructible index and magnifying face, corrected at Kew, is, with two further improvements, all that can be desired.

that can be desired.

The improvements, which the manager of Messrs. Ferris's surgical instrument department carried out for me some time ago, according to my instructions, are these: to have one's own name marked on the instrument instead of the seller's, and to have the corrections at Kew marked against the degrees. The benefit of these: to have one's own name marked on the instrument instead of the seller's, and to have the corrections at Kew marked against the degrees. The benefit of not having to look up these in a bundle of certificates is great. On the strength of this latter suggestion, Messrs. Ferris soon afterwards advertised the Perfected Thermometer.—I am, sir, faithfully yours,

CHARLES STEELE, M.D., F.R.C.S.

TRICYCLES.

TRICCCLES.

Sirk,—In reply to Dr. Wallace, his calculations may be all very well as a theory, but practical experience teaches me that I can ride from 50 to 70 miles per day, and carry a reasonable amount of luggage, without much fatigue. Can he walk that distance daily for a week, or ride a horse, without knocking both up? We have records of two big rides, one consisting of 186 miles, and another of 156 miles, in the twenty-four hours, the latter being done by a man over sixty years of age. Dr. Wallace, in his calculations, has left out entirely the impetus acquired by the machine itself. On a journey (if he were a rider, and I presume he is not), he would find out, as I have done, that frequently only during about one-third part of the journey is the machine propelled by his own power; on the level, the muscular exertion required is almost nil, and on a decline it is absolutely nil; the body is resting. Hence it is left for the inclined part only of the road for real work; and here, again, if the hill be steep, the muscular power is saved, in that it is varied by a dismount and a little pleasurable walk, pushing the machine, at a little more exertion than is required to push a perambulator. On first riding, the muscular strain is felt more than after a little practice. I remember, myself, during my first rides I could not mount a single hill, except very slight inclines, without feeling tired. Now, there are very few for which I care to dismount. Dr. Wallace evidently is not aware that one of the oldest tricycles—the Devon—and one of the latest—the Humber—adopt the vertical thrust; but my experience is, that this is only of use to a heavy rider, and that a slightly forward thrust is better for a light weight, for here the rider gets great assistance for hill climbing from the resistance against the saddle, the weight not being sufficient for propulsion on a fairly steep hill.—I am, sir, yours truly.

P.S.—I am going to take a fortnight's holiday on the 5th on my tricycle to take a fortnight's holiday on the 5

against the scale, the weight hot being suinteen to propulsion of a fairly section.

W. W. HARDWICKE.

P.S.—I am going to take a fortnight's holiday on the 5th on my tricycle to Derby, Burton, Tamworth, Kenilworth, Warwick, Stratford, Oxford, Newbury, Salisbury, Bournemouth, Winchester, Chichester, Arundel, Worthing, to London; and back to Rotherham by Bedford, Kettering, and Nottingham. If Dr. Wallace will accompany me, I shall be very much pleased.

TAPE-WORM.

E,—I quite endorse Dr. Dick's idea of the dose of oil of male fern. In the Egyptian Soudan, where tapeworm is not by any means uncommon, I was accustomed to administer two drachms, with a little mucilage and spirit of chloroform. tomed to administer two drachms, with a little michage and spin of chilosotomic lallowed the patient a full meal at noon, and a little bread and water at 5 or 6 P.M., and at 9 P.M. he had the dose. Next morning, an hour or two before breakfast, he took one ounce of castor-oil. This had the effect of expelling several yards of the worm.—I am, sir, yours, etc.,

Sheffield, July 30th, 1882.

JOSIAH WILLIAMS, L.R.C.P., etc.

Sir, -As there is no address with "Omega's" letter, in your issue of July 1st, I as,—as there is no address with "Omegas letter, in your issue of July 1st, I would like to inform the writer that, if he will employ papaw, he will find that, in a few days, it will entirely melt the tapeworm, and it will pass away. I have used it in several instances, and recommended it in many others. Since first commencing it with a dog two years since, I have not known the dog to be troubled again, although I have the same in my possession .- Yours truly,

ACNE.

SIR,—I cannot but think the attempt of Dr. Wray to class together masturbation and acne as cause and effect most unphilosophical; and, with our present state of knowledge on the etiology of this disease, wholly unjustifiable. Now, however, that the subject has been entered upon, it would be well, I think, for the satisfaction of those specially concerned, that the opinion of the profession should be had on this point. That the pernicious effects of masturbation upon the nervous

system may give rise to acne, is highly probable, and no doubt in some cases it does do so; but this is very different from the sweeping assertion of Dr. Wray. The cases of acne I have met with have been chiefly connected, in females, with disorder of the uterine functions, especially amenorrhoea, in chlorotic or anæmic subjects. In males, I know of no cause which I could at present call special—in fact, I have always looked upon this as a disease of exhaustion, either vascular or nervous. At the present time, however, I have a case under my observation, which there can be no doubt whatever about masturbation being the cause. T which there can be no doubt whatever about masturbation being the cause. This person is also an occasional epileptic; and there is every reason to think that this also has followed on the train of masturbation, as there is no neurotic family history, and he had no fits till after puberty. On one occasion, at least, he had a fit when masturbating, as the surroundings clearly showed.

Seeing that masturbation is a very common failing among epileptics, imbecile partial idiots, and other immates of asylums, I cannot but think that the evidence of the medical gentlemen connected with these establishments would be most valuable in clearing up this point.

Speaking à priori, and in absence of some such evidence as this, confirming

Speaking à priori, and in absence of some such evidence as this, confirming Dr. Wray's statements, I cannot see why masturbation should give rise to acue in any greater extent than other pernicious effects on the nervous system—and these are legion.—I am, etc., JOHN S. MAIN, M.D., C.M. ese are legion.—I am, etc., Manchester.

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# BOOKS, ETC., RECEIVED.

A Treatise on Human Physiology. Designed for the Use of Students and Practitioners of Medicine. By John C. Dalton, M.D. Seventh Edition. London: J. and A. Churchill. 1382.

The Psychology of the Salem Witchcraft Excitement of 1692, and its Practical Application to our own Time. By George M. Beard, A.M., M.D. New York: G. P. Putnam's Sons. London: Trübner and Co. 1382.

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# Contents.

(LIDEXED)

An ADDRESS on SYPHILIS and its EFFECTS upon the CIVIL POPULATION of GREAT YARMOUTH and other MARI-TIME TOWNS. By C. PALMER, M.R.C.S.E., Surgeon to the Yarmouth Hospital ..

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The LARYNGEAL COMPLICA-TIONS of CONSUMPTION. By JAMES M. WILLIAMSON, M.D., Ventnor

A CASE of STRUMOUS DISEASE of the KIDNEYS in RELATION to NEPHRECTOMY. By T. Cole, M.D.Lond., M.R.C.P., Physician to the Royal United Hospital, Bath 208 THERAPEUTIC MEMORANDA.

Tincture of Iodine in Erysipelas. By C. F. HUTCHINSON, M.D.

SURGICAL MEMORANDA. Mam. mary Sinus subsequent to Abscess: Treatment by a Listerian Method: Cure. By J. J. WATERS. M.B... ib. CLINICAL MEMORANDA. Menière's Disease. By J. RINGWOOD, L.K.Q.C.P.

REVIEWS & NOTICES.

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# LEADING ARTICLES.

LEGAL OBLIGATIONS OF THE MRDICAL PROFESSION. III. Actions for Mala-ALCOHOL IN WORKHOUSES .. 213 THE WEEK. Miscellaneous. - A Congress of Cremation Societies .- Cremation of Anatomical Subjects. - M. Pasteur.-The Italian Medical Congress. - Female Nurses for Egypt. -Lead Poisoning.-Lead Poisoning in Holborn .- Overcrowding and Infectious Disease. - Mortality at Mile End.-Statistics of Hospital Saturday .- Small-pox at Wednesbury .-Typhoid Fever at Clapham, due to Infected Milk .- Notification of Infectious Diseases.-Royal College of Physicians.-A Marvel of Surgery .-Statistics of Sunstroke. -- Effects of Irritating the Encephalon.- Death from Chloroform.-The Alleged Spread of Infection from Small-pox Hospitals. -Hospital Sunday Fund, -Cholera in the Rangoon Lunatic Asylum .- The Climate of Rio Janeiro.—The Lungs of London.-The Salmon Disease and its Lessons.—Experimental Biological Research.-Army Medical School.-Smoke Abatement, etc.

THE WREK. SCOTLAND. University of Glasgow.—Scottish Meteorological Society.—Registrar-General's Returns.—Health of Glasgow.—Revival of 

THE EGYPTIAN EXPEDITION. Army and Navy Medical Departments.. 222
THE AMERICAN MEDICAL ASSOCIATION AND ITS PROPOSED WERKLY JOUR-NAI. ROYAL COLLEGE OF SURGEONS OF

#### ASSOCIATION INTELLIGENCE.

GRANTS FOR SCIENTIFIC RESEARCH.

RITISH MEDICAL ASSOCIATION: FIFTIETH ANNUAL MEETING .. ib. ASSOCIATION: BRANCH MEETINGS TO BE HELD 227 NORTH OF ENGLAND BRANCH: ANNUAL MEETING.—METROPOLITAN COUNTIES BRANCH: ANNUAL MEET-ING.—YORKSHIRE BRANCH: ANNUAL 

COMMITTEE REPORT OF THE MEDICAL REFORM

MITTEE OF COUNCIL . 234
REFORT OF COMMITTEE APPOINTED TO
OBTAIN RESTRICTIVE LEGISLATION FOR HABITUAL DRUNKARDS .. 235 STATEMENT AS TO THE ACTION COMMITTERS OF THE BRITISH MEDI-CAL ASSOCIATION AS TO NOTIFICA-TION OF INFECTIOUS DISEASES BY MEDICAL MEN 236

SPECIAL CORRESPONDENCE. Aberdeen ..

CORRESPONDENCE.

On the Contagiousness of Pulmonary Consumption. By H. Davies, M.D.

Defects in Medical Education. By W. Latter, M.D. Lattey, M.D. Certificates of Death ... MEDICO-PARLIAMENTARY 238

MILITARY & NAVAL MEDI. CAL SERVICES

## PUBLIC HEALTH & POOR-LAW MEDICAL SERVICES.

Local Government Board, Grubb and the Chesterton Board of Guardians. — The Regulation of

MEDICAL NEWS.
Pass Lists of Royal Colleges of Physicians and Surgeons, and Apothecaries' Hall.-Medical Vacancies, Appointments, etc.

OPERATION DAYS AND HOURS OF ATTENDANCE AT THE LONDON HOS-

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