

## PHARMACY IN AUSTRALIA.

MEDICUS inquires whether drugs are to be obtained at Melbourne, Adelaide, Sidney, and Brisbane of good quality; and if so, how much more they cost there than in England.

## NAPIER AS A HEALTH-RESORT.

SIR.—Dr. Leslie Allen's interesting article upon the above, in the BRITISH MEDICAL JOURNAL of August 22nd, brings to the notice of the profession a climate worthy of attention. A careful perusal of the article discloses several important natural qualifications in the district, not to be found in every part of the islands; a fine climate, dry air, sandy soil, level sandy beach, with hills rising from it to 200 or 300 feet, and inland, a fine alluvial country lying to the south.

Consumptives in the early stage, who are the most likely people to be sent from England to New Zealand, for the benefit of the voyage, and in order to avoid the English winter, will be weary after a time, especially if travelling alone, of town life; and it is desirable in many cases that they should, if possible, live upon a sheep-run, where they may enjoy a home-life, be able to share in healthy pursuits, interesting occupations, and have horse-exercise. The conclusions to which I came, from travelling in New Zealand some years ago, with an invalid relative, including some weeks spent in Hawkes Bay Province and in Napier, were, that consumptive patients from England, travelling to New Zealand *via* Melbourne, would do well to cross to New Zealand at the end of November or early in December.

Stoppages might be made *en route* to Napier; and, on arrival at the latter place, they should reside facing the sea, at the north part of the town, and remain there till the end of May. The cooler weather would then allow a tour to Auckland, and on to Sydney or Brisbane. Returning at the end of the winter to Napier, patients might either continue to reside there, or, if practicable, go to a sheep-run, and never travel south of Napier or Nelson. The curative advantages of the climate may be very greatly enhanced by a little healthy occupation. Dr. Bennett, I believe, gave great attention to flowers, and so employed his time on the Mediterranean coast, when his health compelled him to live there. If a home-life can be procured for a consumptive traveller, he will not feel his isolation and loneliness so much, and of course it is most important that he should be free from any anxiety. As a medical man, he will do well not to embark in any extensive practice at first.

I believe that at Napier living is tolerably cheap, and residence at a boarding-house can be procured for the sum of thirty shillings weekly. A great objection, however, to New Zealand is the distance from England.—I am, sir, yours truly,

PER MARE PER TERRAS.

## HOME FOR A PARALYTIC.

DR. STRETCH DOWSE refers Mr. Stewart to a small sanatorium at Jevington Polegate, Sussex, where, he has no doubt, the patient would be received, and well cared for. He thinks it unfortunate that no recognised home exists for the paralysed and epileptic beyond the pauper class, but that it is a question which before long must be brought to the notice of a philanthropic public.

S. B.—We would recommend either "A B C, M. R." or "Mr. A B C, M. B."

## PORTABLE OR POCKET FILTERS.

MR. DE VERE HUNT writes to recommend Maiguen's Filtre Rapide (32, St. Mary-at-Hill, Eastcheap, E.C.), as it is quick, capable of being taken to pieces and easily cleaned, and the result satisfactory. He states that Maiguen's pocket filters were largely used in the Nile and Suakin expeditions, and were highly approved of by Lord Wolseley and his staff. There are several in use at the "Inventions" at present, made in various sizes, and of moderate cost. He understands that those used in the Abyssinian campaign were of compressed charcoal.

## INCOME-TAX ASSESSMENT.

MEMBER.—Income-tax on professional incomes is payable on the average income of the last three years. The Commissioners are not justified in making a prospective assessment. If the surveyor has claimed on a larger income than you return, you must appeal to the Commissioners, and satisfy them that the amount claimed is excessive. This will, no doubt, be troublesome, but you cannot refuse to pay unless you get the amount reduced.

## DIARRHEA AND FEEDING-BOTTLES.

SIR.—In the JOURNAL of August 22nd, attention is most properly called to the frequent close connection between infantile diarrhoea and feeding-bottles.

I regret that no allusion was made to that objectionable appendage of most modern bottles, the flexible rubber tube. The old boat-shaped bottle is free from this, but it is difficult to clean mechanically, and I do not consider any other mode of cleaning efficacious, since oil of vitriol, though undoubtedly effective, is too dangerous for ordinary use.

I would recommend anyone interested in the subject to go into the nearest nursery and cut open the tube of the "Alexandra," or similar bottle, and smell it. He would then, I think, do as I have done, banish such elegant contrivances in favour of the older form.—Yours faithfully,

G. B. LONGSTAFFE.

## MILITARY TITLES FOR ARMY MEDICAL OFFICERS.

SIR.—In a leading article, which appeared in the BRITISH MEDICAL JOURNAL of August 22nd, there is an allusion to a remark (by no means flattering to medical men) made by tell-tale Lord Lawrence, when Viceroy of India, on the submission to him of a medical officer's name for the distinction of the Star of India.

Will you allow me to state, for the information of your readers generally, that when I served in India at that time, there was a current report, and one believed to be true, that Lord Lawrence's life was, on one occasion, saved, during a serious illness, through the care, skill, and devotion of a medical man, who was afterwards made his private secretary; further, that on Lord Lawrence assuming the post of Governor-General, it was a request of the members of his family that his particular medical man should be a member of his staff.

Probably some old retired Indian medical officer could verify or contradict the report.—Yours, etc.,

AN ARMY SURGEON.

\* \* \* It is quite true that, during a considerable part of the Viceroyalty of Lord Lawrence a medical officer was his private secretary, but this fact does not militate against the truth of the statement made in our editorial to which our correspondent refers.

## CHRONIC URTICARIA.

SUBSCRIBER asks for hints as to the treatment of chronic and inveterate urticaria. The patient, a married lady, has suffered severely for many years, and no treatment adopted has hitherto been of much benefit.

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

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## BOOKS, ETC., RECEIVED.

Bad Drains and How to Test Them. By R. Harris Reeves. London: E. and F. N. Spon. 1885.

Questions on Magnetism and Electricity. By F. W. Levander, F.R.A.S. Second Edition. London: H. K. Lewis. 1885.

Inebriism; A Pathological and Psychological Study. By T. L. Wright, M.D.

Veterinary Pharmacology and Therapeutics. By J. B. Gresswell, M.R.C.V.S. London: H. K. Lewis. 1885.

Notes on Medical Experiences in India, Principally with Reference to Diseases of the Eye. By Surgeon-Major S. E. Maunsell, M.S. London: H. K. Lewis. 1885.

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