

when he contemplates how nearly this pest is eradicated and observes that a leper is now a rare sight. He will, moreover, when engaged in such a train of thought, naturally inquire for the reason. This happy change, perhaps, may have originated and been continued from the much smaller quantity of salted meat and fish now eaten in these kingdoms; from the use of linen next the skin; from the plenty of better bread; and from the profusion of fruits, roots, legumes, and greens so common now in every family..... One cause of this distemper might be, no doubt, the quantity of wretched fresh and salt fish consumed by the commonalty, at all seasons as well as in Lent, which our poor now would hardly be persuaded to touch."

In fact, White regarded the improved hygienic conditions under which people lived as the main factor in accounting for the decay of the disease; and the stress he lays on fish as an article of diet is interesting in connection with the views held by some modern authorities as to the causation of leprosy and its relation to littoral regions.

TREATMENT OF OBESITY.

MR. W. TOWERS-SMITH (Chancery Lane, W.C.) writes: I have read Dr. Davies's letter with great interest. He says meat diet is attended with risk, and means starvation and nauseates the stomach.

Since January, 1888, I have treated 193 obese patients; the average loss varies from 2 to 3 stones in weight and 12 to 16 inches in abdominal measurement. In no single case has any risk to health occurred, every patient saying: "I feel infinitely relieved, and my health greatly improved." As to the starvation theory, three pounds of meat and one pound of fish, with an ounce of whisky where stimulants are required, cannot mean an approach to want of nutrition. This diet is limited to fourteen days, and no doubt requires some self-denial; the second and third period by gradation permit of considerable variation of food, including rusk, Leman's captain's biscuits, green vegetable, poultry, fish, fruit, whisky, hock, and claret. In fact, the third period differs very little from the ordinary diet of any careful man.

Obviously sugar abstention must be permanent, and saccharin may be substituted. I have found as a general rule where once the taste for sugar is lost very few patients ever care for it again. Dr. Davies gives his loss of weight by Banting's process at 12 pounds in eight months; he omits to mention his loss in girth. His weight for height is not very excessive. I should like him to try his method on a 20-stone man. I expect the result would be unsatisfactory to his patient and himself.

Obesity is a growth which is gradual, and takes years to develop in most cases. I contend by a rapid reduction I put my patient ten years back in weight and girth, and that it will only require partial treatment every six months for a week or so to keep the tendency to obesity down, taking ordinary rational food in between.

I still hold that "Spartan" treatment, judiciously carried out, is safe and thoroughly satisfactory in results. Dr. Davies, in a letter in the JOURNAL of November 17th, 1888, characterises my treatment as "Spartan and needlessly severe." My experience proves to me that, if rapid reduction is to be obtained, some sacrifices are essential. I shall be very glad to see Dr. Davies's book, as it is more than likely I may get some valuable hints. At the same time, I should like him to test my treatment on some healthy 20-stone man, and I feel sure I shall convert him to my ideas.

RECIPROCAL TRANSFUSION.

T. H. W. writes: Dr. Lauder Brunton, in his learned Croonian Lecture, quoting Ringer, suggests washing the leucosomes out of the blood in fevers by injecting saline solutions. What would be the effect of mutually transfusing the blood of a fever patient—say typhoid in early stage—and that of a person who has had the fever? The bacilli cannot, as a rule, develop in the blood of such a person, either because the bacillus of the previous attack has left as a final product an autopoxin, or else because the pabulum on which the bacillus feeds is exhausted.

Now, if, as is probable, the first is the true explanation, it militates very much against the idea of washing out the leucosomes, but greatly favours the transfusion idea; for, if a large quantity of blood containing this bacillus poison could be exchanged for the original blood, it is reasonable to hope that the bacillus would be destroyed in the veins of the patient, and, of course, could not develop on the person supplying the exchange.

If the second explanation be the correct one—that the pabulum is exhausted—of course the thing would not work so well; for, although we might hope to diminish the intensity of the fever, etc., in our patients, there would be the probability of inducing it again in the giver of the blood—in fact, we should divide the fever between the two. Doubtless it would be still better if we could inject the bacillus poison directly, or gradually produce it in the blood by inoculation of attenuated bacilli; but this latter could only be preventive and not curative.

THE CONSULTING ROOM SNEAK.

BITTER EXPERIENCE warns the readers of the JOURNAL against a respectably dressed young woman, of a countenanced appearance. This young person, on Wednesday, July 3rd, made a professional call at his house in his absence, and, under pretence of waiting, stole a solid silver snuff-box and a silver-mounted umbrella. *Verbum sap.*

COMPLETE AUTOBIOGRAPHICAL INFORMATION.

THE craze for prying into every detail of the lives of celebrated persons, and for publishing the whole of their most private and personal correspondence, threatens to fill our biographies with details only fitted for medical publication. In the *Early Letters of Jane Welsh Carlyle*, recently published by Messrs. Swan Sonnenschein and Company, and edited by Mr. Ritchie, we have at page 27 the information that "Betty's mama's hens stand very much in need of pills. However, she means to look about on Monday to see if the hens are more laxative in another quarter;" and, at p. 265, we have the more personal reference: "This stirring life is more to my mind, and has, besides, a beneficial effect on my bowels." Surely it is the part of an editor to suppress such paragraphs as these, which, had the writer been alive, could only have covered her with confusion, and serve no good purpose now.

TO CORRESPONDENTS.

OUR correspondents are reminded that prolixity is a great bar to publication and, with the constant pressure upon every department of the JOURNAL, brevity of style and conciseness of statement greatly facilitate early insertion. We are compelled to return and hold over a great number of communications, chiefly by reason of their unnecessary length.

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

Mr. A. Frost, London; Dr. R. Robertson, Ventnor; Mr. E. Owen, London; Mr. J. W. Washbourn, London; Mr. T. B. Browne, London; Mr. M. J. McQuaid, Ballyjamesduff; G. B. Morgan, M.B., Sunderland; Anti-Critic; Mr. J. W. Vickers, London; Dr. W. Sykes, Mexborough; Dr. J. Hutchinson, Shawlands; Mr. T. Hart-Smith, Epsom; Mr. T. Pridgin Teale, Leeds; Mr. A. Allen, London; Mr. R. J. Symonds, London; The Editor of the *Sunday Times*, London; Mr. F. N. Brown, Woking; Mr. G. G. Whitwell, Shrewsbury; Dr. Mickle, London; Dr. G. W. Potter, London; The Secretary of the New South Wales Branch of the British Medical Association, Sydney; Mr. F. Kerslake, London; The Registrar of the Royal College of Surgeons in Ireland, Dublin; Mr. N. Alexander, London; Mr. R. Dawson, Montreal; Mr. W. J. Meharry, Belfast; Mr. H. Sottan, London; Dr. J. R. Kely, Gosport; Dr. J. F. W. Silk, London; Dr. Hunter Mackenzie, Edinburgh; Dr. C. M. Chadwick, Leeds; Our Egyptian Correspondent, Cairo; Mr. C. S. Loch, London; Sir T. Crawford, London; Mr. T. S. Short, Birmingham; The St. Bede Chemical Company, Newcastle-on-Tyne; Dr. Rentoul, Liverpool; J. R. Purdy, M.B., Oulton; Dr. D. R. Thompson, London; Mr. E. J. Ryan MacMahon, Cheltenham; Medical Staff; The Honorary Secretary of the North Wales Branch of the British Medical Association, Portmadoc; Dr. R. Bowden, Ramsgate; Dr. R. T. Smith, London; Dr. F. Warner, London; Dr. A. Mantle, Durham; Mr. A. G. F. Bernard, Upton-on-Severn; Inquirer; Dr. J. Struthers, Aberdeen; Belladonna; Mr. H. A. Allbutt, Leeds; Mr. G. L. Drewe, London; Mr. Leech, Woolpit; Dr. S. Moritz, Manchester; The Secretary of the Sanitary Institute, London; D. Messrs. Ross and Co., London; Dr. Edwards, London; Dr. A. M. Anderson, Dundee; Mr. Lawson Tait, Birmingham; Mr. S. Welch, London; Dr. J. D. McCaw, Belfast; The Secretary of the Devonshire Hospital, Buxton; Mr. F. L. Benham, London; Mr. R. G. Lynam, Stoke-on-Trent; Mr. S. C. Smith, Halifax; Dr. E. M. Skerritt, Clifton; Dr. R. Stockman, Edinburgh; Dr. J. Donnett, Bognor; Mr. F. F. Hills, Bristol; Dr. L. Stevenson, London; The Secretary of the West London Medico-Chirurgical Society, London; Mr. G. Dalziel, London; Mr. G. Pulford, London; Dr. J. W. Hunt, London; T. L. K. Davies, M.B., Llandudno; Mr. H. A. Smith, Headingley; Mr. E. Powell, Nottingham; Miss C. M. Lohr, Cambridge; Dr. D. Goyder, Bradford; Our Glasgow Correspondent; Dr. C. R. Illingworth, Accrington; Dr. Walter Pearce, London; Dr. F. Hall, Leeds; Mr. H. N. Lawrence, London; Mr. Blackett, London; Dr. H. Manley, West Bromwich; Mr. J. G. M. G. Stack, Gosberton; Our Liverpool Correspondent; Mr. J. T. McMahon, London; C. J. Weir, M.B., London; Dr. T. Laffan, Cashel; Mr. D. T. Smith, Preston; Mr. A. Fraser, Whitley-by-Sea; Dr. T. Harris, Manchester; Mr. M. B. Lawrence, Hemel Hempstead; Mr. T. Griffin, Bognor; Our Birmingham Correspondent; Mr. H. Kimpton, London; Dr. F. W. Cook, London; Dr. Gowers, London; Dr. J. P. Henry, St. Mary Cray; Dr. Macpherson, London; Mr. J. P. Murray, London; Dr. Robert Barnes, London; J. F. Craig, M.B., Birmingham; Dr. R. Thorne Thorne, London; Dr. J. H. Bridges, London; Mr. C. Farmer, London; Mr. J. H. Williams, Llanidloes; Mr. W. Cheyne, London; Dr. P. Abraham, London; Mr. H. V. Dillon, Portsmouth; Mr. H. Tuck, Salop; Mr. H. Sewill, London; Sir Spencer Wells, London; etc.

BOOKS, etc., RECEIVED.

Medical Handbook of Life Assurance for the Use of Medical and other Officers of Companies. By James Edward Pollock, M.D., and James Chisholm, London: Cassell and Co., Limited. 1889.
The Canaries for Consumptives. By E. Paget Thurstan, M.D., B.A. London: W. H. Allen and Co. 1889.

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

Seven lines and under	...	...	...	...	£0 3 6
Each additional line	...	...	...	...	0 0 4
A whole column	...	...	...	...	1 15 0
A page	...	...	...	...	5 0 0

An average line contains seven words.

When a series of insertions of the same advertisement is ordered, a discount made on the above scale in the following proportions, beyond which no reduction can be allowed:

For 6 insertions, a deduction of	...	...	10 per cent.
" 12 or 13 "	...	20	"
" 26 "	...	25	"

Special terms for occasional change of copy during series:	...	...	30	"
20 per cent. if not less than 26 pages be taken	...	...	in half	or
25 "	52	"	quarter pages.	
30 "	104	"		

For these terms the series must, in each case, be completed within twelve months from the date of first insertion.

Advertisements should be delivered, addressed to the Manager at the Office not later than noon on the Wednesday preceding publication; and, if not paid for at the time, should be accompanied by a reference.

Post-Office Orders should be made payable to the British Medical Association at the West Central Post-Office, High Holborn. Small amounts may be paid in postage-stamps.

NOTICE.—Advertisers are requested to observe that it is contrary to the Post Regulations to receive at Post-Offices letter addressed to initials only.