

with an hereditary taint or incipient consumption, who are anxious, while improving their health, to strike out a career. This class, I believe, are better in a dry warm climate, as South Africa, South Australia, or South California. At the same time, I do not contradict Dr. Garland's assertion that patients removed from the coasts of New Zealand do well on the plains of Otago. Far from it, I distinctly stated that consumptive well-to-do patients generally would find those plains beneficial during the warm months of the year.

I wish, in conclusion, to say that in condemning the inconsiderate laudation of unsuitable places as health resorts I did not refer to Dr. Garland, and that this would probably have appeared in my letter but for that limitation of space which necessitates the cutting down of communications to the lowest possible degree.

CHLOROFORM AND ITS ACCIDENTS.

MESSRS. J. F. MACFARLAN AND CO. (Edinburgh) write: Looking at this subject from a chloroform manufacturers' point of view, we would preface the few remarks we have to make by saying that the medical profession might always insist on being supplied with chloroform of the highest degree of purity and unmercifully reject all that does not come up to the proper standard.

We think it will be generally admitted by the profession that they can secure a preparation of almost perfect purity; there are still, however, some who magnify the injurious effects of the minute trace of impurity sometimes found in chloroform, ascribing to it even the power of death, to whom we would point out that if they are correct, this impurity must be the most powerful poison known. There is no evidence in existence which will support this view, but our own experience shows that the concentrated impurities may be inhaled with no other bad effect than a slight headache; we are therefore compelled to look elsewhere for the cause of accidents.

It is well known that under certain conditions pure chloroform does produce death, and it is equally well known that under other conditions the same chloroform may be and is employed with benefit to some and injury to others; in other words, that the same substance produces opposite effects on different subjects, clearly pointing to some radical difference between those subjected to its influence, and leading us to ask to what degree of perfection the medical profession can diagnose the fitness of a patient for chloroform? why it is that the same chloroform is injurious to some and beneficial to others? and lastly, is there no way by which this difference, revealed by chloroform, may be recognised before the administration of the anæsthetic?

SALICYLATE OF SODA IN DIPHTHERIA: MENTHOL IN HAY FEVER.

MR. LENNOX BROWNE (Weymouth Street, W.) writes: I am happy to offer a note of confirmation of the experience of Mr. Couldery as to the value of salicylate of soda in diphtheria, and of that of Mr. Lennox Wainwright of the value of menthol in hay fever.

With regard to the first, the salicylate of soda is of most value in those milder cases of faucial and tonsillar exudation with hardly appreciable physical distinction from so-called "follicular tonsillitis," which, as Dr. Jacobi was the first to point out, is much more frequently insanitary and diphtheritic in its nature than is generally believed. The mixture of the salicylate with chlorate of sodium—less depressing than the chlorate of potassium—and cinchona was recommended by me as an internal remedy for diphtheria in the second edition of my book, published four years ago, and for tonsillitis in the first, published in 1878. The salicylate, which "should be given in very moderate doses, should be discontinued if there is any symptom of cardiac complication." The salicylate of soda is valueless in the graver forms of diphtheria, and especially when there is exudation either in the nostrils or larynx. In these cases biniodide of mercury with bark is the remedy I now employ.

As to menthol in hay fever, I have employed this drug for many years, and find that, preferably to its combination with ammonia to be used as a snuffing salts, it is best administered either as a spray—30 grains to the ounce of liquid vaseline; as a portable inhaler of the crystals; or as a snuff—10 to 15 grains in a medium of powdered spermaceti or sugar of milk.

THE DOLOMITES AS A HEALTH RESORT.

DR. WALTER G. WOLFORD (Finchley Road, N.W.) writes: I have twice visited the Dolomites, and, while I have found that region agreeable enough to the tourist in rude health, I should hardly like to recommend it as a health resort. I should not like to be ill there. I have stayed there each time in August and September, and, on the Italian side of the frontier, the stanches were of the worst and the accommodation not much better. Matters are decidedly better on the Austrian side, but there, as a rule, the hotels are small and comfortless for those not in good health. I imagine that the rainfall must be large there, and at times of heavy rains all communication with the surrounding district is likely to be shut off. In the winter of 1888-9 there were 15 feet of snow in a compact mass at Cortina, while some 22 feet of snow fell, so I was informed by a friend residing at that place. I should not think that there was a medical man who understood English in the whole district.

LETTERS, COMMUNICATIONS, ETC., received:

(A) Mr. V. Ardagh, Metlakatla, British Columbia; Dr. Abercrombie, London; Mr. J. P. Aston, Ecclehill. (B) Mr. G. T. Bates, Builth Wells; Messrs. Burroughs, Wellcome, and Co., London; Mr. G. Brodie, London; Mr. Ernest Birt, Wakefield; Dr. H. Boyland, Paris; Dr. R. Bowden, Ramsgate; Mr. T. W. Bentley, Vrede, Orange Free State; Better Days; Mr. P. B. Bentlif, Jersey; Mr. C. S. Buck, Milverton; Mr. J. Brown, Liverpool; Dr. Cresswell Baber, Brighton. (C) Dr. C. W. Chapman, Hampstead; Dr. J. Crerar, Maryport; O. J. Currie, M.B., London; Dr. D. H. Cullimore, London; Mr. F. H. W. Cottam, Newton-le-Willows; Dr. T. J. Compton, Norwich; Professor Corfield, London;

Mr. H. N. Custance, London; Mr. J. F. Cobb, Melbourne; Dr. Cooney, Fulham; Dr. J. Christie, Hillhead; R. H. Clarke, M.B., Redhill. (D) Surgeon-Major H. L. Donovan, Buttevant; Dr. A. Duke, Dublin; A. Dentist; Dr. M. C. Dulles, Croydon; The Director-General of the Medical Department of the Navy; Mr. P. Dunn, London. (E) Mr. Adams Frost, London; Dr. G. Forden, Ashcott; The Frame Wood Company, London. (G) Mr. T. C. Grey, Swansea; Dr. A. C. Godfrey, Freemantle; Dr. C. F. Grindrod, Malvern; Mr. J. Gibson, Greetland; Mr. G. D. Goman, Guildford; Mr. J. Gay, London. (H) Mr. A. Haviland, Oxford; Mr. A. D. Hughes, Kenchester; Mr. E. Hughes, London; Mrs. B. Hitchcock, Winchester; Mr. V. Horsley, London; H. J.; Dr. Halliburton, London; Surgeon G. E. Hale, Paignton. (J) Dr. J. R. James, Pentre; Mr. Arthur Jackson, Huddersfield; Dr. A. Johnston, Monsall; Mr. W. Jones, Nantyglo. (K) Mr. W. Kiddle, Dublin; Messrs. Krohne and Sesemann, London; Mr. J. Kenworthy, Tenby. (L) Mr. E. Lydon, Derby; Mr. A. E. B. Love, Bournemouth; Mr. H. K. Lewis, London; Mr. C. S. Loch, London; Dr. R. A. Lundie, Edinburgh; Mr. H. W. Lawrence, Hadlow; Mr. Love, Bournemouth; Surgeon-Major E. Lawrie, Hyderabad; Dr. A. E. Leeson, Monte Video; Mr. J. Lawrence-Hamilton, Brighton; Sir J. Lister, London. (M) Medicus; Messrs. J. F. Macfarlan and Co., Edinburgh; Dr. W. A. McLachlan, Dumbarton; Dr. C. S. Murray, London; Sir W. A. Mackinnon, London; Dr. J. W. Moore, Dublin; Dr. D. MacVail, Glasgow; Mr. W. W. Millard, Edinburgh; Dr. Mickle, London; M.B., C.M., L.R.C.P.E.; Dr. R. C. McCulloch, Shankhill; Surgeon G. E. Moffet, Glasgow; Dr. C. S. Murray, London; H. Manley, M.B., West Bromwich; M.B., C.M.; Dr. A. E. Mahood, Birmingham; Mr. M. Macfarlane, London. (N) Mr. P. Newell, Crowborough. (O) Surgeon P. W. O'Gorman, Miranzai Field Force, India. (P) A Poor-law Guardian; Dr. Pye-Smith, London; Dr. N. A. Powell, Toronto; Mr. H. P. Pike, Gloucester; Mr. H. C. Pauli, Luton. (Q) Sir Richard Quain, London. (R) Mr. L. Ricketts, Harrogate; Mr. R. O. Ryan, Thorpe; Mr. K. Roberts, Bishops Lydeard; Mr. H. S. Robinson, London; Mr. J. S. Riddell, Aberdeen; Mr. A. W. Mayo Robson, Leeds; Dr. W. Robertson, Newcastle-on-Tyne; Dr. A. Ruffer, London. (S) Professor William Smith, London; Dr. T. Savage, Birmingham; Dr. Stewart, Nottingham; The Secretary of the Royal Agricultural Society of England, London; The Secretary of the General Practitioners' Alliance, London; Mr. H. Smith, Jersey; Dr. Sykes, Gosport; Student; The Secretary of the Victoria University, Manchester. (T) Mr. E. O. Tardy, Tunbridge; Dr. R. Thomson, Bournemouth; Dr. G. Thin, London; Mr. J. Tyrrell, London; Dr. H. Thornhill, Badulla, Ceylon; T. G.; Mr. A. V. Trow, Cults; Surgeon Treherne, Stonehouse; C. H. Taylor, M.B., Derby. (V) Mr. Vernon, London. (W) Mr. E. White Wallis, London; Dr. H. Woods, London; Dr. A. Whitelegge, Wakefield; Mrs. F. Winslow, St. Leonard's-on-Sea; Mr. J. F. Wood, Gloucester; Dr. O. Wood, London; Mr. W. Roger Williams, London; etc.

BOOKS, ETC., RECEIVED.

Prichard and Symonds in especial relation to Mental Science. By D. Hack Tuke, M.D., LL.D. London: J. and A. Churchill. 1891.
Atlas der Cystoskopie. Von Dr. Emil Burekhardt. Basel: Benno Schwabe. 1891.
The Pharmacopœias of Twenty-nine of the London Hospitals. By Peter Squire. Sixth edition. Revised by Peter Wyatt Squire and Alfred Herbert Squire. London: J. and A. Churchill. 1891.

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