

As regards personal experience, I cannot say that I was ever satisfied that chloral had any influence on the course of the disease, although I gave it in all the cases which came under my care. On the other hand, I have often seen the most violent spasms persisting although the patient was deeply under the influence of the drug; and I am certain that in many cases, when its use is pushed to an extreme degree, it does more harm than good. Long before the bacterial origin of tetanus was known surgeons in Madras had recognised the fact that wounds in which some part of the body had been crushed against the earth, and where particles of dust had been driven into the tissues, were more frequently followed by tetanus than any others. It was often possible to foretell the onset of tetanus from the nature of the wound, and for a long time I made it a practice to administer chloral in all such cases as soon as they were admitted into hospital. This was done with a view of testing the action of the drug in the early stages of the disease, but it was found that this treatment neither delayed the onset of tetanus nor mitigated its severity. I cannot say that I have found any other drug of any more service than chloral. There can be no doubt that, as far as our present knowledge goes, the essential points in the treatment of tetanus are the seclusion of the patient and careful feeding. The stimulus of a strong light, a loud noise, or a draught of air increases the frequency of the convulsive seizures, and hence it is essential to isolate the patient if possible in a separate ward and protect him from all disturbing influences. It is needless to say that our best efforts must be directed to the feeding of the patient to support him in his struggle with the disease. Owing to the necessity of disturbing the patient as little as possible, and also to the locking of the jaws, the administration of food becomes often very difficult and requires great skill and care on the part of the nurses. Rectal alimentation is often necessary.

It is somewhat surprising to hear of amputation being recommended in the treatment of tetanus, yet Mr. Maylard says: "Had a tender spot been detected in the foot the latter would have been amputated, and the boy very possibly saved the long and dangerous illness." The fact that spasms continue after amputation has been resorted to proves that the poison exercises its influence directly on the nerve centres. Hence the removal of the wounded member after trismus has once set in can be of no avail, and must, on the other hand, seriously diminish the chances of recovery.

Our great hope regarding tetanus lies in prophylaxis. The more widely it is recognised that the poison is introduced by means of dust and earth, the greater care will be taken in cleansing wounds impregnated with these substances. During the ten years 1875 to 1885, out of 1,112 cases of wounds admitted into the General Hospital, Madras, 108 (9.7 per cent.) developed tetanus. The incidence of the disease was, however, much greater during the early part of this period than during the later part. During the first five years 10.5 per cent. of cases of wound were followed by tetanus. During the next three years 9.2 per cent. developed tetanus; whereas during the last two years only 7.2 per cent. suffered. These results point to improvement in antiseptic treatment and more thorough cleansing of wounds. It is necessary, for the credit of the hospital, to say that most of these patients do not come for treatment until some days have elapsed, and, furthermore, that in many of these cases it is extremely difficult to purify the wound effectually. When a heavy cartwheel passes over a naked foot, crushing it against the ground and driving particles of dust deeply and violently into the tissues, the purification of the wound becomes a matter of difficulty. The latter remarks of course apply particularly to India, where the microbe of tetanus lurks in every roadway, and where, owing to the scanty garments of the natives, poison-laden dust is forced into a wound without the intervention of any article of clothing.

LETTERS, COMMUNICATIONS, Etc., received:

(A) Dr. Abercrombie, London; A Member of the British Medical Association and Seventeen Years' Service Royal Navy; Mr. P. Akerman, Wootton Bassett; Mr. G. W. Alexander, Dundee. (B) Mr. A. Barron, Twickenham; Mr. H. T. Butlin, London; Sir J. Crichton Browne, London; Mr. E. Creswell Baber, Brighton; Dr. H. D. Buchanan, Thirsk; W. H. Bunting, M.B., Blackburn; Dr. Fletcher Beach, Darenth; Mr. E. J. Byrd, Pudsey; Mr. T. B. Browne, London; Dr. Berdoe, London. (C) Mr. A. Codd, Bromley; Mr. W. H. Courtney, Liskeard; Mr. Bruce Clarke, London; Mr. H. E. Crook, Margate; Dr. Collie, London; G. Campbell, M.B., Partick; Mr. C. E. Cassal, London; Mr. R. Clegg, Manchester; Messrs. Cassell and Co., London. (D) Mr. J. A. Dow, London; Mr. J. M. Draper, Blackburn; Mr. Norris F. Davey, Abergavenny. (E) Mr. John Ewens, Clifton; Messrs. Evans and Wormull, London; G. G. E. (F) Dr. Hingston Fox, London; W. E. St. Laurence Finny, M.B., Kingston Hill. (G) Brigade-Surg. Lieut.-Col. C. H. Y. Godwin, Netley; Mr. J. H. P. Graham, Devonport; Dr. F. W. Grant, Elgin; G. F. Grant, M.B., London; Dr. A. Hill Griffith, Manchester; Mr. T. A. Green, Accrington; Mr. J. C. Grinling, Burton-on-Trent. (H) Honorary Secretary of the Caxton Convalescent Home, London; Honorary Secretary of the Guild of St. Cecilia, London; Mr. J. Haysman, London; Dr. A. H. Hassall, Lucerne; Mr. W. E. Hoyle, Manchester; Surgeon H. C. Hudson, Jullundur, Punjab; Surgeon-Captain J. C. Haslett, Exeter; Dr. J. Hutson, Belmont, Barbadoes; Messrs. Haasenstein and Vogler, Amsterdam. (I) Dr. V. Idelson, Berne. (J) Mr. F. B. Jennings, Felixstowe; Mr. R. Jones, London; Mr. G. Johnson, Birmingham; Mr. T. T. Jackson, Liverpool; Jaegers Sanitary Woollen Company, London. (K) Dr. J. Kerr, Bradford; J. K. Kelly, M.B., Glasgow; Dr. Kinkead, Galway; Mr. R. H. Keeman, Rathmines; Mr. Thomas Kendrick, Birmingham; Dr. Norman Kerr, London. (L) Dr. Liddell, Winchester; R. H. Lucy, M.B., Plymouth;

T. L.; Liverpool Correspondent; Mr. C. G. Lee, Liverpool; C. L.; Dr. Lush, Weymouth; Mr. Hugh Lane, Bath; Dr. Lovett, London. (M) Mr. S. G. Moore, Leeds; Professor McKendrick, Stonehaven; Professor A. Mosso, Turin; Dr. J. McMordie, Belfast; Mr. H. F. C. Monninger, London; M.B. (N) Mr. H. Norman, Salisbury; Dr. R. Neale, London; E. N. Nason, M.B., Nuneaton; Editor *Nursing Record*, London. (O) One of Them; Observer; Mr. C. W. O'Connor, Oswestry. (P) Major Pead, London; Dr. Frank Payne, London; Mr. G. G. Parsons, Coventry; Mr. H. G. Planner and Co., London; Surgeon Porter, Mandalay; Messrs. G. Phillips and Son, London; Puzzled; Prison Surgeon; Dr. A. Paterson, Dundee; Mr. T. Llewelyn Parry, Liverpool; Mr. E. Pope, Tring; Mrs. I. Peck, Sleaford; Mr. C. E. Paget, Salford; Mr. J. Foster Palmer, London. (Q) Sir Richard Quain, London. (R) Mr. G. A. Rae, Devonport; Dr. Rowland, New Amsterdam; Dr. Rentoul, Liverpool; Dr. E. Rice, Oxford. (S) Secretary of the East Anglian Branch of the British Medical Association; Surgeon-Captain A. E. Smithson, Hull; Dr. R. Saundby, Birmingham; Mr. W. J. Smith, London; Sufferer; Dr. Steele, London; Secretary of the Sydney and New South Wales Branch of the British Medical Association; Mr. S. W. Smith, Cheltenham; Messrs. Street and Co., London; Surgeon R. R. Sleman, London; Secretary of the Society of Apothecaries; Mr. R. Stoney, Tilbury. (T) Dr. Danford Thomas, London; Mrs. Alice Thomson, London; Teufel Remedial Appliances Company, London. (U) Union Steamship Company, London; Dr. Underhill, Tipton; University of Durham; Mr. Upton, London. (V) Mr. E. W. Veale, Bristol; Veritas; Mr. T. Jenner Verrall, Brighton; Viator. (W) Ware Wheat; Mr. J. H. Weyrens, St. Cloud, Minn.; Dr. Outterson Wood, London; Dr. F. H. Walmsley, Abbot's Langley; Mr. R. H. Wellington, Sutton Bridge; Mr. Hugo Woltheim, London; Dr. Whitelegge, Wakefield; Rev. J. W. Williams, Ashton-under-Lyne; Mr. G. E. Williamson, Newcastle-on-Tyne; Dr. W. H. Williams, Sherborne; Mr. E. White Wallis, London; Dr. J. Wallace, Greenwich; Dr. Walters, Reigate; Mr. John Wyley, Hull. (X) X. Y. Z. (Y) Mr. J. Young, Narborough; etc.

BOOKS, Etc., RECEIVED.

- Eleventh Annual Report of the State Board of Health of New York. Albany: James B. Lyon. 1891.
- My Water-Cure. By Sebastian Kneipp. Translated from the German by A. de F. Edinburgh and London: William Blackwood and Sons. 1891.
- The British Guiana Medical Annual and Hospital Reports. Edited by J. S. Wallbridge, M.R.C.S., and E. D. Rowland, M.B. Edin. Demerara: Baldwin and Co. 1891.
- On the Pathology and Treatment of Glaucoma. By Priestley Smith. London: J. and A. Churchill. 1891.
- The Ophthalmoscope. By Gustavus Hartridge, F.R.C.S. London: J. and A. Churchill. 1891.
- Clinical Lectures on Surgical Subjects. By Christopher Heath. London: J. and A. Churchill. 1891.
- A Manual of the Practice of Medicine. By Frederick Taylor, M.D., F.R.C.P. Second Edition. London: J. and A. Churchill. 1891.
- The Practice of Medicine. By M. Charteris, M.D. Sixth Edition. London: J. and A. Churchill. 1891.
- The Frog: an Introduction to Anatomy, Histology, and Embryology. By A. Milnes Marshall, M.D. Fourth Edition. Manchester: J. E. Cornish. 1891.
- Veterinary Notes for Horse-owners. By M. Horace Hayes, F.R.C.V.S. Fourth Edition. London: W. Thacker and Co. 1891.

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

Seven lines and under	...	...	...	20	3	8
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 is 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 12 "	...	...	20 "
" 26 "	...	...	25 "
" 52 "	...	...	30 "

Special terms for occasional change of copy during series: 20 per cent. if not less than 26 pages be taken; or their equivalent in half or quarter pages.

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 Postal Regulations to receive at Post-Offices letters addressed to initials only.