for a separate incorporation, which was granted in 1617. This was part of a general movement of the time to separate callings which bordered on professions from those which were trades—e.g., the Scriveners and the Musicians; although the Surgeons were not successful in getting separated from the Barbers until much later, in 1745. In 1701 a case was carried on appeal to the House of Lords *re* a Mr. Rose, which settled once and for all that an apothecary was able legally to practise medicine, and that he was entitled to visit and prescribe for a patient as well as prepare medicine for his treatment.

Since that date an apothecary in England has been a qualified medical practitioner, and for nearly two centuries the bulk of the general practice of the country was in his hands.—I am, Sir, yours faithfully,

THOMAS CARR, M.D. Durh.,

A Liveryman of the Worshipful Society of Apothecaries.
Blackpool, Nov. 26th, 1910.

BRITISH MEDICAL BENEVOLENT FUND: SUPPORT URGENTLY NEEDED.

To the Editor of THE LANCET.

SIR,—At the last meeting of the committee I had to report that the grant account on the bank was overdrawn to the extent of £250. In spite of this the committee had to deal with so many and distressing applications that the sum of £300 more was voted, with the result that the deficit now amounts to about £550. Fortunately we have been able so far to meet these demands out of the reserves accumulated at the time of our special appeal two years ago. There is now but little more left, and unless further supplies are quickly forthcoming it will be necessary to refuse help to many deserving cases, and that at the time of year when help is most needed and applications most numerous. We spend all we have, but we cannot spend what we have not got.

I appeal, therefore, to members of the profession to come to the support of the Fund and save it from the pain and reproach of having to refuse relief for want of means. Subscriptions and donations may be sent to me. *Bis dat qui cito dat.*—I am, Sir, yours faithfully,

SAMUEL WEST, M.D. Oxon.,

Honorary Treasurer, British Medical Benevolent Fund.
15, Wimpole-street, London, W.

"606."

To the Editor of THE LANCET.

SIR,—We beg to inform you that we are placing the "Ehrlich-Hata" arsenic compound dioxydiamidoarsenobenzol, generally known as "606," on the market about the middle of December next, under the denomination "Salvarsan."

As it is absolutely impossible for us to answer personally all the inquiries which medical men are sending us daily from all parts of the United Kingdom, we should esteem it a great favour if you would extend the hospitality of your esteemed journal to these lines in order that the above fact may be made known to all your readers. Thanking you in advance,—We remain, Sir, yours truly,

PRO MEISTER, LUCIUS, AND BRÜNING, LTD.,

London, E.C., Nov. 28th, 1910.

ERNEST SCHOLL.

PSORIASIS FROM A BACTERIOLOGICAL POINT OF VIEW.

To the Editor of THE LANCET.

SIR,—I have read with interest Dr. Serrell Cooke's note on this subject, published in last week's number of THE LANCET. On looking through my microscopic sections I find bodies in the so-called epidermal abscesses of psoriasis which I now think are the stumpy bacilli which he has found so constantly in his recent investigations.

I must congratulate both Dr. Cooke and Mr. Garner (the bacteriologist at St. John's Hospital) on their labours, which seem so promising. That I am prepared for the parasitic theory of psoriasis to be proved will be seen from the following abstract of my remarks made in the discussion on psoriasis at the Manchester meeting of the British Medical

Association, published in the *British Medical Journal* of Oct. 25th, 1902, p. 1332:—

Dr. Eddowes thought that they had not got to the end of staining methods, from which they might still expect much without surrendering the position to chemistry. He had found in a case of psoriasis (*guttata*) a spindle-shaped organism in a sebaceous gland and large micrococci in the mouth of the related hair follicle which formed the centre of the early efflorescence. He taught that *pityriasis rubra* did not become superadded to psoriasis, but that one passed into the other gradually. Psoriasis and pityriasis were closely related. The conditions could change from one to the other.

I am, Sir, yours faithfully,

ALFRED EDDOWES, M.D. Edin.

Wimpole-street, W., Nov. 29th, 1910.

ROYAL SOCIETY OF MEDICINE: ELECTRO- THERAPEUTICAL SECTION.

To the Editor of THE LANCET.

SIR,—In your issue of Oct. 29th last, p. 1319, under the heading "Röntgen Society," it is stated that this society is "the parent society of the Electro-Therapeutical Section of the Royal Society of Medicine."

At the request of the council of this section we are writing to ask if you will kindly contradict this statement. The Röntgen Society, consisting largely of lay members, was founded to study the physical side of the Röntgen rays, and is in no way a medical society. The British Electro-Therapeutic Society was founded shortly afterwards to study the medical aspects and was a purely medical society. It is this society which was the parent of the Electro-Therapeutical Section of the Royal Society of Medicine.

We are, Sir, yours faithfully,

REGINALD MORTON,

G. HARRISON ORTON,

Honorary Secretaries.

Nov. 22nd, 1910.

SURGICAL INSTRUMENTS AND HOSPITAL PATIENTS.

To the Editor of THE LANCET.

SIR,—The question of the supply of surgical instruments and appliances is one that presses heavily on all societies dealing with the relief of the sick poor, and as a contributor and worker in connexion with one or two of such bodies I should be grateful if you would allow me space in your columns to put some aspects of this matter before the "profession."

The position of any person or society that is asked to contribute funds for the supply of a surgical instrument is one of some difficulty. As "lay persons" we are incompetent to criticise the decisions of the surgeon, and our business as charitable agents is to carry out his instructions and to act on the supposition that all expenditure ordered is essential. It is clear that any other attitude would be quite impossible and inevitably lead to most undesirable friction. But a great responsibility on this very account is thus laid upon the surgeon, for it depends upon him whether the circumstances of the family and the degree of benefit to be derived from the instrument are taken into account or whether it is ordered irrespective of any such considerations.

Do surgeons realise that this responsibility is theirs? Many of them certainly do, and experience has probably shown these that appliances suitable to wealthy patients, where every aid to remedy defect is desirable, are not always justifiable for the poor. Instruments given free are too often carelessly used and quickly destroyed, or even never worn at all; but when patients are too poor to pay even a small proportion of the cost themselves they have to be so provided, and it is the business of charity to find the money somehow. Wherever possible, however, patients should be asked to pay a little in proportion to their means, and I would submit that we are justified in asking those who prescribe to bear in mind that it is not only the wealthy and charitable public who are called upon to put their hands in their pockets, but in almost every case the patients themselves who have to share the cost and incur a debt which, in addition to the many other expenses of illness, they can often ill afford, and which should not be put upon them unless absolutely necessary.

I am, Sir, yours faithfully,

SOCIAL WORKER.

Nov. 22nd, 1910.