October, 1887; and "Chloroform, the best of Anæsthetics," by Julian J. Chisolm, M.D., being a reprint of a paper read before the Baltimore Academy of Medicine.

Dr. M'Guire, whose experience as medical director of the 2nd Army Corps of the Army of Northern Virginia has been very large, writes: "In the beginning of this paper I said that I thought chloroform the safer agent in cardiac troubles. I wish to except from this class a nervously weak heart. In organic valvular disease of the heart, with the usual compensative muscular hypertrophy, I have given chloroform hundreds of times, and never had cause for alarm. On the contrary, the heart's action became usually more quiet and regular, and chloroform is safer here than ether. But in a heart weak from fatty degeneration, or from loss of blood, or great anæmia from other causes, any anæsthetic is hazardous; but chloroform, I believe, is more dangerous than ether." And again: "In all operations about the face or throat, where blood or other fluids may escape into the windpipe, ether is the more dangerous, and chloroform the safer agent to use. I do not think I ever saw the irritability of the larynx or trachea entirely lost in anæsthesia from chloroform, but I have seen this happen in ether cases; the sensibility or reflex irritability is for the time abolished, and foreign substances easily find their way into the windpipe." Further on the following sentence occurs: "It is a significant fact, too, that Nussbaum has seen in military life 40,000 administrations of chloroform without an accident; and that in the Confederate Army Corps to which I was attached as medical director chloroform was given 28,000 times without a death ascribed to its use." Of ether, Dr. M'Guire writes: "In ether, several minutes after the vapour is taken away and all danger from the anæsthetic is supposed to have passed, when all ether vapour we would think had escaped from the lungs, dangerous symptoms suddenly present themselves, from which the patient is with difficulty rescued, or even death itself takes place. Or, again, hours, or even days, after ether has been given, acute nephritis or pneumonia, directly traceable to the ether, occurs, threatening the life or causing the death of the patient." Further, of chloroform he writes: "In either young or old, or in cases where cardiac, renal, or pulmonary trouble is suspected, as a rule, I think, chloroform is safer." Such is the opinion of this great surgeon, who sums up the evidence with the impartiality of an English judge and the candour of a Virginian gentleman.

Dr. Chisolm, whose pamphlet, "Chloroform, the best of Anæsthetics," from which I quote, was issued this year, writes: "At the Edinburgh Infirmary, during a period of twenty-eight years from the introduction of chloroform into surgical practice, only two deaths had been attributed to chloroform, which, according to Kerr, is one death in 36,500 administrations. Elser of Strasburg had used chloroform 16,000 times, and had never seen a fatal case; Kidd of London 10,000 times, without a death; Dr. Bardeleben of Berlin 30,000 times before meeting with a death; French surgeons in the Crimea 30,000 cases, and not one fatal issue; English surgeons in the Crimea 12,000 times, with one single death reported as attributed to it; M'Guire, of Jackson's corps, 28,000 times, and no death; Richardson had seen it used in the London hospitals 15,000 times before he met with the first fatal case; Billroth of Vienna 12,500 times before he met with his first accident." He further states that in the Federal army it was administered in 80,000 cases. In thirty-seven cases fatal results have been ascribed to its use. The Federal authorities make the following comment: "Considering the great number of cases in which chloroform was applied principally during and after the exciting circumstances of a battle, when expedition was a matter of necessity, it is remarkable that not more cases of death from this agent have been recorded. With what justice the fatal issue in these cases here cited is chargeable to the anæsthetics the reader must judge for himself." To this Dr. Chisolm adds his own experience of fully 10,000 cases without a single death. He collected an array of 300,000 administrations of chloroform, with forty-three deaths; even attributing them all to idiosyncrasy, which calls for a most unbounded charity, and we only have one death in 70,000 cases. Can any stronger proof of the excessive rarity of the fatal idiosyncrasy in chloroform be needed? And just one more quotation: "Bronchial troubles are also (with renal) considered antagonistic to the safe administration of sulphuric ether, not directly, but indirectly. In such cases, after the operation has been completed and the resuscitated patient has been put to bed a fatal pneumonia has

developed, which follows too often the administration of ether to be considered a mere coincidence. This fatal pneumonia has not been noticed as a sequel of chloroform anæsthesia. Using chloroform exclusively, I have never thought it necessary to examine the urine or the chest for lung diseases, and have had no occasion to regret my seeming neglect in this connexion. From the standpoint of my own personal experience, I know of no organic lesion which contra-indicates the careful and thorough administration of chloroform. Chloroform, when judiciously used, is one of the safest active remedies of the *materia medica*, supplying nearly every good and avoiding nearly every danger."

Allow me just to add that from the earliest days of surgery anæsthetics were known, and that with and without anæsthetics brain and abdominal surgery were practised. Moulins, O'Hallaron, and Dupuytren made a reputation in the former, and McDowell of Kentucky revived laparotomy, following—perhaps unconsciously—the incisions pictured in the "Armentarium Chirurgicum" of Senectetus, of 1661; and the successes of Anthony de Pozzi and Fontanus, both of whom excised successfully the spleen, are recorded in the second volume of the folio edition of Morgagni, and they may also be found in William Cooke's abridged translation; and I have no doubt that you are aware of the fact that, in 1549, Zaccharelli and Fioravanti at Naples successfully performed splenectomy. Anæsthetics gradually became disused during the eighteenth century; but, as late as 1775, Dr. Colin Hossack of Colchester, physician to Frederick, Prince of Wales, translated the formula of Boerhaave's celebrated anæsthetic powder, of which half was "to be taken one hour before the operation." But I quite agree with your article that Guthrie's discovery, chloroform, facilitates surgery and allows the operator more leisure for the completion of the peritoneal toilet. I, however, hold that the high mortality, when it does occur, is due to the faulty administration of the chloroform, and cannot rightly be ascribed to any unsuitability of the agent as the best of anæsthetics.

I am, Sirs, yours obediently,

GEORGE FOY, F.R.C.S.

Lower Gardiner-street, Dublin, Sept. 5th, 1888.

* * Mr. Foy's letter affords proof of the accuracy of our remarks; while his quotations, when read by the light of more recent knowledge of the subject, invalidate Mr. Foy's argument. Those who are familiar with American methods of ether-giving will naturally repudiate any conclusions based upon the experience of American surgeons, since the routine drenching with ether in vogue in the United States has no counterpart amongst skilled anæsthetists here. Sequelæ such as those described by Dr. McGuire are practically unknown in England. Dr. Chisolm may not have lost any patients from chloroform, but he has published accounts of several cases in which he confesses he thought death was imminent. The statistics quoted by Mr. Foy, and borrowed from Drs. McGuire and Chisolm, are really out of date, and unhappily give too low a percentage of deaths. Even accepting them, they show a far higher death-rate than can be obtained from ether. It matters nothing, if the patient dies, whether we attribute the fatality to "idiosyncrasy," "incompetence," or what not, for by Mr. Foy's own showing the same conditions obtain for ether as for chloroform, and yet far fewer deaths result from the former than from the latter agent. Putting aside statistics and individual preferences for chloroform, we are bound to admit its dangers as compared with ether, by the proofs given of its physiological action in mammals.—ED. L.

THE CONTAGIOUS DISEASES ACTS.

To the Editors of THE LANCET.

SIRS,—When trying to promote legislation to protect the community from venereal disease, it is a mistake to point to men in the army and navy as the chief sufferers, for those who denounce all attempts to hold the State responsible for the evils of prostitution care nothing for the sufferings of soldiers and sailors, and even maintain that in the interests of liberty every man must be free to contract disease or

not as he pleases; and, besides, the "unco guid," in their detestable pharisaical malice, will even rejoice to learn that the victim to vice is the victim to disease, while many of those who are not blinded by self-righteous brutality will argue that the good old principle, "let the buyer beware," must hold good in all the dealings between adults. It is a mistake to appeal to the pockets of the ratepayers and to urge the magnitude of the national loss from disablement of soldiers and sailors by disease, for the opponents of legislation have then the advantage of posing as the champions of morality against those who would treat virtue and liberty as mere questions of money or expediency, and they will rightly denounce all attempts to decide questions of morality by a computation of the number of pounds to be gained or lost. It is a mistake to lay all the blame for defective legislation on the public or the Government, for the public can only be held responsible according to their knowledge, and the Government can only act as representatives of the people. It is also a mistake to ask for special legislation for the prevention of any particular disease, since it is similar to a request for special legislation to prevent one man from assaulting another with a hammer.

Having pointed out the methods of procedure which cannot be advocated with success or reason, it is necessary to lay down those which cannot be objected to by any intelligent man. The fact must be made known that thousands of innocent women and children in London are at the present moment suffering from the effects of syphilis, although they are very seldom aware of the cause of all their misery. The healthy blooming girl marries a man who is apparently in perfect health, and yet within a year of marriage she has a miscarriage of a putrid child, or she has a pining shrivelled child prematurely born, or she has an apparently healthy child which in a few weeks becomes afflicted with some skin disease, and probably remains a pallid, unhealthy victim of vice for life; and no matter how sound the constitution of the mother may have been, she has in some way suffered injury from which she will never perfectly recover. How often is the husband or the wife or the children taught the truth by the medical practitioner? I have not the moral courage to tell some people plainly that they are the victims of syphilis, and if I did, an action for libel might result. The real culprit is the medical profession as a body, for it has kept the public in ignorance of the facts, and has thrown a cloud of mystery around venereal diseases as if they must belong to some different category from all other diseases. The sufferers from syphilis in London are in every street and in every grade of society, but in most cases the symptoms are so slight that the chronic skin diseases, the chronic eye diseases, the miscarriages, and the pallid feeble children are supposed to be sent by Providence. I attempted two years ago, in my work on "Disease and Sin," to convince both divinity and medical students that it is blasphemy to say that any disease is sent by God, and that everyone who assists to maintain a condition of disease, or who neglects to assist in preventing it, is not only a sinner but a criminal. The man or woman who propagates a contagious disease, the preacher who interferes with any means of prevention, and the Government which neglects to adopt all practicable means of prevention, are all to be regarded as engaged in warfare against the happiness of mankind. We require honesty enough to call a spade a spade, and when a man dies from small-pox or typhoid fever, instead of profanely saying that it was the will of God that the death should occur, we ought to demand an investigation in order to discover the cause.

The demand for special legislation is illogical, since a man is a criminal whether he injures another with a hammer, or with vitriol, or with poison; and everyone is a criminal who knowingly injures another with small-pox, or with scarlatina, or with syphilis. The general principle ought to be laid down that he who wilfully or culpably injures another is a criminal, who must be liable to damages for the injury, and must be punished by imprisonment or fine besides. The punishment must be in proportion to the injury inflicted and to the power over the cause, so that, while the propagator of scarlatina may sometimes be dismissed without punishment owing to his inability to know with certainty that he was a propagator of infective material, there can be no excuse taken for him who disfigures another with small-pox. The victim of scarlatina or small-pox may enjoy as good health for the remainder of his life as if he had never suffered from disease, and his children will be unaffected;

but the propagator of syphilis is guilty of the greatest crime that can be perpetrated, since the constitution of the victim is not only ruined, but his children are often murdered and the happiness of his wife destroyed. Hence it is the plain duty of every civilised Government to sentence the man or woman who propagates syphilis to a prolonged period of penal servitude; and every man or woman who attempts to inflict the grievous bodily injury of syphilis upon the other, whether by solicitation or by yielding to solicitation, ought to receive a punishment of not less than one year's imprisonment with hard labour. Any man or woman who is found suffering from syphilis, and who has wilfully neglected to report the evil to the constituted authorities, ought to be punished. Thousands of children in London are calling to Heaven for vengeance against preachers, doctors, legislators, and parents who by their ignorance, perversity, or neglect are guilty of murdering the innocent by years of torture, and of denying to future generations the health which Providence intended should be the birthright of every human being. The remedy for the evil is so plain and simple that the nation which does not adopt it is not worthy of the blessing of health; but it seems that thousands of years of evolution and education cannot produce a man with as much common sense as Moses. I am, Sirs, yours very truly,

Sept. 15th, 1888.

A MEDICAL MUSER

To the Editors of THE LANCET.

SIRS,—As you have given publicity to a portion of my letter, and have criticised it rather severely, I ask you to publish this reply, as otherwise some misunderstanding as to my opinions may arise. I think, if you refer to my letter, you will see that I consider "that nothing could be done on the basis of the late Acts during the existence of the present House of Commons," not that I consider that nothing can ever be done. I cannot admit that I have fallen into two errors. With regard to the first of these, I do not think that it is untrue "that the Acts were directed against one sex—i.e., the female." Anyway, they were largely supposed to be so, and this was the principal cause of the successful opposition to them. Also, I do not accept the theory of spontaneous generation, and therefore for the present I must decline to admit that the "greater amount of venereal disease is created by prostitutes." No woman can create specific disease, and she cannot even "propagate" it unless she has herself been infected by a previously diseased person, presumably a man. Again, I submit that it is not an "untenable proposition" that "men are equally guilty with prostitutes in spreading disease." Anyone who knows how comparatively respectable servants girls are infected by soldiers and sailors would consider that the men are more guilty; and as these men are not driven by want of money to "spread disease," morally they are much worse than the prostitute, who is condemned to "spread disease" or starve. I say, without fear of contradiction, that if the men of the army and navy were periodically examined, especially before being allowed leave, an immense reduction of disease would be effected.

I am, Sirs, your obedient servant,

Southsea, Sept. 15th, 1888.

ALBERT BENTHALL.

TREATMENT OF ECZEMA.

To the Editors of THE LANCET.

SIRS,—In June of this year a communication by me appeared in THE LANCET on the treatment of eczema simplex as affecting the fingers and backs of the hands especially. Since then I have had suggested to me, and tried with excellent results, a new method of treating eczema of the palms of the hand and soles of the feet. This I wish strongly to commend to the consideration of the profession. In eczema sclerosum we find the skin thickened and hard. Large dry flakes of epidermis are firmly adherent to the corium below, projecting only at their periphery. The primary lesion, however, is *always* a vesicle; but this is seldom seen, its life history being very evanescent. Let us follow the plan adopted in the article referred to, and proceed to consider—

1. *The medicinal treatment.*—(a) External. Well soak the hands for several minutes in soft hot water; cleanse them with "lanoline eucalyptine," or lanoline coal-tar soap. Then get some fresh hot water. Now place on the palms