I enclose a correct list of the Kuram Force Staff (Medical).
The Khyber line Divisions are now broken up.

Yours faithfully,

A. F. DALE,

Deputy Surgeon-General, P. M. O., Kuram Force.
Kuram, Sept. 22, 1880.

Deputy Surgeon-General A. J. Dale—Principal Medical Officer.

Army Medical Department.

Surge-Major T. Wright, European Base Hospital.
" W. O'Halloran in medical charge E-3 R.A. Kohat.
" R. Jackson " 2-8 Regt.
" J. J. O'Reilly " Depôt Hospital, Thall.
" T. W. Patterson " 1-8 R.A.
" W. M. Harman " 85th K. L. I.
Surgeons W. Donovan, doing duty with Base Hospital.
" R. H. Quill, in medical charge C-4 R.A.
" J. C. Dorman " Depôt Hospital, Kuram.
" J. Boulger, doing duty Depôt Hospital, Thall.
" P. H. Johnstone doing duty with Base Hospital.
" P. G. Jeners " Depot Hospital, Kohat.

Indian Medical Department.

Surge-Major G. Griffith, in medical charge 18 Bengal Cavalry.
" H. Compique, Deoli Irregular Force.
urgeons W. N. Keefer in medical charge Native Base Hospital.
" J. E. C. Ferris, 1st Bengal Cavalry.
" W. E. Griffiths, in medical charge 20th Punjab Infantry.
" J. Crofts, in officiating medical charge 21st P.N.I.
" S. F. Bigger " 13th N.I.
" G. M. Nixon " 5th N.L.I.
" G. W. P. Dennys " 13th B. Lancers.
" S. C. Sarkies " 29th P.N.I.

Deputy Surgeon H. Kendall, who was promoted to the rank of Surgeon-General in last Saturday's *Gazette*, remains at Chatham as Principal Medical Officer of that district until he is retired on full pay, in January next.

ARMY MEDICAL DEPARTMENT.—Deputy Surgeon-General Henry Kendall, M.D., to be Surgeon-General, vice H. G. Gordon, M.D., granted retired pay; Brigade Surgeon John Ogilvy, M.D., to be Deputy Surgeon-General, vice H. Kendall, M.D.; Surgeon-Major William Skeen, M.D., to be Brigade-Surgeon, vice J. Ogilvy, M.D.; Surgeon-Major Emil Becher, M.D., is granted retired pay, with the honorary rank of Brigade Surgeon; Surgeon-Major Thomas Allen Thornhill, M.B., is granted retired pay, with the honorary rank of Brigade-Surgeon; Surgeon-Major Francis Patrick Staples has retired upon temporary half-pay; Surgeon-Major Alexander Johnston, M.D., from half-pay, to be Surgeon-Major. The undermentioned Surgeons to be Surgeons-Major:—Alexander Haldane Stokes, M.B.; George Roderick Triphook, M.B.; James Scanlan, M.B.; George Corry; Francis Arthur Davy, M.D.; Alexander William Duke, M.D.; Robert Mark Bradford; Henry Stannard; Richard Dawson Bennett; Thomas Faris, M.B.; and Hugh Brady White.

VOLUNTEERS.—1st Norfolk (Artillery) Corps: William Mallam Vores, M.B., to be Acting Surgeon; dated Oct. 20th, 1880. 1st Buckinghamshire (Rifle) Corps: Cadwallader Brooke Wolseley, M.D., to be Acting Surgeon; dated Oct. 20th, 1880. 1st Worcestershire Corps: Honorary Assistant Surgeon Cecil Webster resigns his commission; dated Oct. 20th, 1880. 10th Lancashire Corps: John Murray, M.B., to be Acting Surgeon; dated Oct. 20th, 1880.

ADMIRALTY.—In accordance with the provisions of Her Majesty's Orders in Council of Feb. 22nd, 1870, and Feb. 4th, 1875, Staff-Surgeon Alexander Crosbie, M.D., has been placed on the Retired List of his rank from the 8th inst.

Royal Naval Artillery Volunteers (London Brigade).—Arthur Price, M.R.C.S., to be Surgeon.

Surgeon J. A. Langdon has been appointed to the *Firefly*.

THE MASON SCIENCE COLLEGE has made a good beginning forty-four students having already entered.

Correspondence.

"Audi alteram partem."

ON THE IMMEDIATE TREATMENT OF STRICTURE OF THE URETHRA.

To the Editor of THE LANCET.

SIR,—In my letter to you of Oct. 2nd, I omitted to refer to Mr. Holt's second note, in which he stated that there was a false passage in one of the fatal cases at King's College Hospital. As I mentioned that Mr. Henry Smith had had a death, and as it was to his case that Mr. Holt's remark applied, I think it only just to Mr. Smith to state that the false passage existed months before he even saw the patient, and had apparently nothing to do with the fatal result. If Mr. Holt had honoured the meeting at Cambridge with his presence, and stated, as he has done in his note, that he had been fortunate enough not to have had a fatal case in private, I should have asked him for information as to certain cases about which it is possible I might have been misinformed. Much good will come out of the discussion which has taken place in your columns. It was not known at the meeting that Mr. Christopher Heath had had five deaths, for, although that gentleman had published successful cases of the operation, *in extenso*, in THE LANCET, he had not enlightened the profession with the details of his fatal ones. My remark as to how few of the deaths had been published was based on a list I had with me at the meeting of upwards of thirty cases terminating fatally, which had occurred to different surgeons in this country, of which I had been accidentally informed by various members of our profession. In reply to Mr. Harrison, I would say that I am not aware that any advocate of internal urethrotomy has ever asserted of it, as Mr. Holt has done of rupture, that it was "free from every danger immediate or remote." I have yet to learn that such an affirmation can be made of any operation on the urinary organs: "A scratch in the urethra may cause death" (Gouley). As Mr. Macnamara has omitted to specify what were the "unsupported" charges to which he refers, I am unable to notice his letter. The advocates of internal urethrotomy are to be congratulated on Dr. Lyster's accession to their ranks. His example is just another illustration of what is to be seen all over the world of surgeons abandoning rupture and taking to cutting. If anyone can show me an operation which is attended by less risk, and followed by better results than internal urethrotomy, I will at once say "I am already converted; my heart is with him."

I remain, Sir, your obedient servant,

Portman-square, Oct. 18th, 1880.

W. F. TEEVAN.

CHIAN TURPENTINE IN CANCER.

To the Editor of THE LANCET.

SIR,—I am sorry to see in to-day's LANCET that Prof. Clay accuses me of having "made an attack upon him." I had no such intention. If, however, to make a painstaking, scrupulous, and detailed trial of Chian turpentine in the treatment of uterine and other cancer, and to publish my results, is to attack him, then I am guilty. If to declare my intention still further to prove or disprove its efficacy is attacking him, I am guilty. If to invite Mr. Clay to watch a case with one of my colleagues or myself, and to treat that case as he shall choose, or to allow us to see one of his cases, if this be attacking him, I am guilty. If to utter no single word in criticism of Mr. Clay's theories or facts is to attack him, then, and then only, I am guilty.

Indeed, Sir, Prof. Clay's severest critic has been Prof. Clay himself, whose own words (quoted in my letter of the 9th) tell of pain relieved, hæmorrhage checked, infiltration lessened, and cancers "literally melting away" in a time varying from four days to at most a few weeks. Sure nothing quicker was ever achieved by magic or spell in the Middle Ages—

"Eye of newt, or toe of frog,
Wool of bat, and tongue of dog,"

never worked more mightily. And yet in the same breath

Mr. Clay complains that others with whom the drug has proved uniformly worthless have not tried it long enough, or have used the wrong turpentine, or, worse still, as in the instance of Mr. Lawson Tait and myself, he replies only by an unworthy innuendo.

In conclusion, let me say that since I began this letter I was asked to see a patient in consultation with a gentleman (name and address enclosed) who has been under Mr. Clay's care (which case, curiously enough, turns out to be one of those referred to by Mr. Lawson Tait), and is still taking his pills. She informs me that the pain grows worse, and on examination her doctor tells me that the progress of the cancer has not been affected by the Chian turpentine since he examined her when Mr. Clay first saw her. In short, the case is in a condition of active growth.

Sincerely hoping that a cancer cure may be discovered which will be useful in other hands than those of the publisher,

I remain, Sir, yours, &c.,

J. HICKINBOTHAM.

Broad-street, Birmingham, Oct. 16th, 1880.

To the Editor of THE LANCET.

SIR,—Mr. Clay's letter avoids all the points raised in those of Dr. Hickinbotham and myself, and his retiring under the shelter of an insinuation will do little to establish his assertions.

The claim of the cancer-curer has been put forward so often and so vainly that any repetition of it must at once be met with incredulity. Mr. Clay's method of publication is not such as to overcome that, and there is nothing to be heard in Birmingham to diminish it. Mr. Clay's communications appeared in the local daily papers, and since that we have heard of cases of all kinds of cancer flocking to him, and of his retailing to them his mixture and his pills. But not a word has reached us about a cure, save that one case of Dr. Drury's, which so unfortunately died with symptoms, as described to me, uncommonly like those of an ordinary death from cancer. Of this case, still more unfortunately, no post-mortem is recorded.

Surely, if this drug has the effect claimed by Mr. Clay, his colleagues must know something of his astonishing cures. But I cannot learn that they do. The details, scant though they are, which Mr. Clay gives of his cases, are quite sufficient to show that he has not attached sufficient importance to two very common incidents in the history of uterine cancer, and this omission fully explains all that he has written on the subject. Let him submit his cases to his colleagues, or other competent observers, that the actual existence of cancer may be beyond dispute; let him cure a single case, and he will have no reason to complain of the congratulations he will receive from the profession in Birmingham, as elsewhere. On the contrary, let him maintain his present attitude, and no language will be too strong for his condemnation.

I am, Sir, your obedient servant,

Birmingham, Oct. 18th, 1880.

LAWSON TAIT.

To the Editor of THE LANCET.

SIR,—In THE LANCET of July 10th last you kindly inserted a letter from me respecting a case of scirrhus cancer of the uterus, which had apparently derived great benefit from the Chian turpentine as recommended by Professor Clay. Will you allow me to state that since that letter appeared the patient has gradually become worse: secondary symptoms, such as phlebitis and blocking-up of the femoral veins, constipation, alternating with severe and almost uncontrollable diarrhoea, vomiting and inability to retain food on the stomach, &c. &c., soon setting in. And now the cancerous cachexia and emaciation, repeated floodings, and offensive discharge, indicate too plainly that the end is not far distant.

That the turpentine appeared for a time to check the advance of the disease, and also to cause a decided diminution in the size of the tumour, I cannot deny; and as my patient persevered so steadily in taking the pills obtained from the firm of chemists in London whence Professor Clay kindly advised me to obtain them for her, I regret very much having now to give such an unsatisfactory account of her.

Will the gentlemen who wrote to me respecting the further

result of the treatment in this case kindly "accept this intimation."

I remain, Sir, yours obediently,

J. E. KENYON, L.R.C.P. Lond., M.R.C.S. Eng.

Park-road, Bradford, Yorks, Oct. 12th, 1880.

HASTY NOTES BY A RAMBLER.

THE PENNSYLVANIA HOSPITAL AT PHILADELPHIA.

THIS hospital, which now holds two hundred beds, was established about 1751, and with its foundation Dr. Franklin was intimately connected. It gives one the impression externally of an old-fashioned English house, massively, yet commodiously put together. Within are found the most modern and approved arrangements. Perhaps exception might be taken to the resident officers' rooms, one medium-sized room being scarcely sufficient accommodation as the common sitting-room and bedroom of two officers. At the same time, even in this room there is something that will hardly be seen in any hospital in our metropolis—viz., telephonic communication with each member of the staff, and the city central office. While waiting for the doctor, who very kindly acted as showman, it was not a little astonishing to hear verbal inquiries from the police-court concerning the progress of a poor fellow who had that morning been stabbed.

The wards are of good size, not at all overcrowded, with painted walls. The floors are either polished or painted. The absence of fireplaces, and the excellence of the ventilation, are perhaps the most remarkable features in the hospital. It appears that since 1876 they have had in use forced ventilation by fans and flues, arranged both for heated and cold air. In the basement is a revolving fan, eight feet in diameter, and thirty inches wide, driven by steam. This fan, which is calculated to supply 30,000 cubic feet of air per minute, is placed at the orifice of a large fresh air-duct, which leads to the chamber containing the steam-coils for heating (these coils may be in action or not, according to the season of the year) and thence by large smooth flues to all parts of the building. Along the middle of the wards, on either side, are iron supports from floor to ceiling, which communicate at their bases with these smooth air-flues. For about eighteen inches up from the floor the supports are perforated, and through the perforations hot or cold air is continually pouring into the ward. The supports are perforated at the top as well as at the bottom, and through their upper ends they communicate with ventilating flues which carry the foul air away through the roof. I was assured that the wards are always fresh; that there is no difficulty in regulating the temperature; that draught is never complained of; and, what is more important than all, that during the last four years traumatic erysipelas and septicæmia, which were prevalent before, have been almost unknown.

In reply to inquiries concerning the nursing arrangements, I received some exceedingly strong testimony in favour of male attendants in male wards, and was informed that in Philadelphia, except at one or two Catholic institutions, male attendants were invariably employed.

The jerking and jarring of the patient consequent on moving the hospital iron bedstead, whose castors are notoriously faulty, is got over by means of a small carriage with india-rubber wheels of ample size, which is rolled under the bed. By a simple arrangement of screws and levers, the carriage lifts the bedstead off its legs, and permits of its being moved in any direction without discomfort to the patient.

Until the year 1873, accidents, whether drunken or otherwise, were admitted to the wards at all hours of the night—a deplorable arrangement indeed. In consequence of the injustice that was thus done to patients in the hospital, "recent accident wards" were constructed not far from the entrance. These wards contain six male and four female beds. Here all in-patient cases are first placed, and those arriving during the night are kept until next day. And that the accidents proper should not be disturbed by those brought on by drink, there are separate