vessels contract the blood pressure rises, when they dilate the blood pressure falls.³ The only possible deduction from these elementary facts is that the general state of the blood-vessels in shock is that of dilatation. When Mr. Malcolm has exposed the fallacy in this argument and in others which might be presented in a similar form it will be time enough to consider his excursions into such by-paths as the effects of treatment of which his paper was composed.

Concerning the effects of treatment, it seems pertinent to inquire whether Mr. Malcolm's belief in his view of the constricted state of the blood-vessels in shock has ever induced him to exhibit full doses of nitrite of amyl in that condition. So prompt and reliable a vaso-dilator could hardly fail to produce a very impressive result.

I am, Sirs, yours faithfully,

London, W., March 16th, 1907.

LEONARD WILLIAMS.

FIRE AT THE ROYAL FREE HOSPITAL.

To the Editors of THE LANCET.

SIRS,—In order to allay anxiety on the part of friends of patients and others interested in the Royal Free Hospital which may result from the reports published in some of the newspapers respecting a small fire which occurred in one of the wards early on the morning of March 14th, I venture to ask you kindly to grant space for the following statement. The fire was caused by the joists under one of the fireplaces in the "Annie Zunz" Ward having become ignited. Owing, however, to the prompt action of the hospital staff and the fire brigade the fire was very quickly extinguished and none of the patients were seriously alarmed. I am glad to be able to state that the medical staff report that all the patients are entirely free from any ill-effects from what might have proved a very serious calamity. I may state that the hospital is fully equipped with fire-extinguishing appliances and all the porters and nursing staff are regularly drilled and instructed by an expert fireman in the use of the fire appliances.

I am, Sirs, yours faithfully,

C. W. THIES, Secretary.

Royal Free Hospital, London, W.C., March 16th, 1907.

THE POWERS OF MEDICAL OFFICERS OF HEALTH.

To the Editors of THE LANCET.

SIRS,—I take it the reason for the existence of the medical officer of health is that he may assist to the utmost of his power in stamping out, or, at least, scotching the inroad of, infectious diseases. But the medical officer of health has not the legal peremptory power to exercise this necessary function. He has to consider who it is that makes the complaint, whom the complaint is lodged against, and whether it will pay him to take up the case at all. He is not a free agent, with all his knowledge of sanitation; with all his convictions of the existence and dissemination of the death-dealing microbe, he must wait for it to assert itself, and he cannot, in many cases, forestall it by precautionary measures. I know of a case where a medical officer of health was appointed by a town council and the terms of his appointment were such as empowered it to "kick its own nigger." This was the actual expression used. The council did kick its own nigger and kicked him out of his office. There seems to me greatly to need an extension of the Act of Parliament giving to the medical officer of health absolute power of control for the repression to the extent of his ability of notifiable diseases. Of course, he would be still liable for damages in case of malicious interference. The public well-being demands it, even if the mayor or the town clerk kept pigs in a proscribed area.

To bring this closer home by an illustration of fact, I have lately been elected on to the committee of a mechanics' institution of over 4000 members. It is shockingly badly ventilated. I have applied to the medical officer of health. He cannot help me. It is a private institution. I have applied to him for a copy of the list of notified cases to hand over to the librarian to prevent the re-issue of books returned from an infectious case—for what is more natural than that a convalescent should seek readable books? He dare not give it to me. I have written the town clerk to strengthen his hand. He agrees that the consequences might be serious if the

medical officer of health did. I have written to the President of the Local Government Board two or three times. We have spotted fever near us and around; we are likely soon to have it. I have at last a letter this morning from the Assistant Secretary stating that the Board has no jurisdiction and cannot undertake to intervene in the matter of ventilation. With reference to the library, the Board is not aware of any statutory provisions requiring the medical officer of health to inform the committee of a library of the cases of infectious disease notified to him as the medical officer of health.

I believe I have heard that medical officers of health are themselves trying to get an increase of powers and a security of tenure of office in this independent direction. This seems to be a case that is recent and important enough to help them. An amendment to their Act seems necessary if anyone will undertake to get a Member of Parliament not to consent to wait until the mare is gone before he locks the stable door. I have myself retired from practice as a dental surgeon, and having no axe to grind shall be happy to place my facts and any assistance I can give at the disposal of anyone in thorough earnest on these matters of public health.

I am, Sirs, yours faithfully,

HENRY BLANDY, L.D.S. Edin., Irel., & Glasg.,

late Dental Surgeon to Nottingham General Hospital, Eye Infirmary, and Lenton and Beeston Orphanages.

146, Gregory Boulevard, Nottingham, March 17th, 1907.

YELLOW FEVER IN CUBA AND ITS MEANS OF PROPAGATION.

To the Editors of THE LANCET.

SIRS,—In reviewing my article on "Yellow Fever again in Cuba" in your editorial comment published in THE LANCET of Feb. 23rd, 1907, you have placed me in a wrong light and consequently made me suffer an injustice which, I am sure, was unintentionally done. The concluding words of your elucidation of my writing are the following: "His article is not without interest but will hardly modify the opinions of those who concluded with the several commissions that yellow fever is propagated by mosquitoes." These words give the wrong impression that I do not believe yellow fever is propagated by mosquitoes, and there is where you inadvertently have placed me in a false light. I have never denied that yellow fever is transmitted by mosquitoes. What I have always contended from the very first moment it was brought to public notice in Havana is the conclusion of the American Yellow Fever Commission in Cuba in 1900, that "the female mosquito of the species *stegomyia fasciata* is the only and exclusive etiological cause, and the only and exclusive means of propagation of yellow fever." Which certainly is a very different thing from what you, unconsciously, accuse me of believing. I am of opinion that although mosquitoes, no doubt, transmit yellow fever under certain and well-defined conditions, yet there are besides other means of propagation of yellow fever—as, for instance, biting flies, bed-bugs, lice, chigoes, fleas, sand ticks, and other kinds of ticks. And it is very strange that no controlling experiments had been made with these domestic insects.

Another error in your kind review of my article is that the grand total of 89 cases of yellow fever, with 37 deaths (a death-rate of 41·57 per cent.) does not cover the whole year 1906, but only goes as far as July 1st; that is, to the end of the first six months of that year. During the second semester of 1906 a great many more cases of yellow fever occurred in Cuba.

I am, Sirs, yours faithfully,

A. M. FERNANDEZ DE YBARRA, A.B., M.D.

New York City, March 10th, 1907.

THE ELECTIONS OF GUARDIANS.

To the Editors of THE LANCET.

SIRS,—I think it a pity that Mr. J. Theodore Dodd, a guardian and councillor of the city of Oxford, should attempt to drag the vexed question of out-door relief into the columns of a medical journal. His axiom that infectious diseases, such as measles, whooping-cough, fevers of various descriptions, and phthisis, may be checked by being brought to the notice of a medical man at an early stage goes, of course, without saying, but when he launches out into the general question of "out-relief" I venture to submit that this is a very different

³ R. H. Starling: Elements of Human Physiology.