last February, but the writer of it omits to mention that in the discussion which followed Surgeon-General H. Hamilton, C.B., promptly denied, from personal knowledge, the accuracy of Major James's main contentions. Since the Congress Lieutenant-Colonel H. D. Rowan, R.A.M.C., who was principal medical officer for some years at Mian Mir, and Colonel H. J. Waller Barrow, who now holds that office, have written to the *Allahabad Pioneer* and the *Lahore Civil and Military Gazette* to the same effect. I regret that I have no copy of Surgeon-General Hamilton's remarks, but I enclose the letters of Lieutenant-Colonel Rowan and Colonel Waller Barrow, and will be very glad if you, Sir, can find space to lay before your readers the sense of what they say. I may add that Colonel J. Shearer, C.B., I.M.S., principal medical officer Dajirat and Bannu Brigades, inspected Mian Mir after the Congress, and that he and Colonel R. H. Forman, R.A.M.C., principal medical officer Bombay, have furnished me with many facts which, together with those of the officers previously referred to, show that Major James's conclusions (as might be surmised by any careful critic of his paper) are completely groundless. The salient points are that the cantonment was never cleared to anything approaching the extent he pretends; that, in fact, shortly before his arrival it had been flooded for weeks by an exceptionally heavy rainfall; that an epidemic of malaria was raging all over the surrounding country; that some of the children examined by him had come to the station only a few months previously; that there is no guarantee that many of the other persons examined by him had not been infected elsewhere (the population being a military and a changing one); that he omits to mention these vital points; and that the statistics furnished by him are quite unreliable.

The writer of your article is scarcely accurate when he describes Major S. P. James and Captain S. R. Christophers as being at the time when they commenced their fiasco at Mian Mir in 1901 "two experts in the subject of malaria prevention." They were then young men who had not long been studying malaria, and I have never heard of any previous practical anti-malaria work done by them—a very different thing. Their first reports were exhaustively criticised by Colonel G. M. Giles, Captain E. P. Sewell, and myself (see *British Medical Journal*, Sept. 17th, 1904), and to these criticisms they did not reply. The more thorough work commenced by General Kitchener in 1904-05 was advised, not by them, but by Surgeon-General Hamilton and Colonel Scott Reid, I.M.S., and Major James now attempts to justify his previous failure by showing that these subsequent measures were as fruitless as his own.

To support this attitude better he states at the end of his paper that success in such operations elsewhere "has been reported on evidence that will not bear criticism and is often ridiculous." Pressed at the Congress to say which campaign he referred to he mentioned Ismailia. Accordingly I begged Sir George Clarke, F.R.S., G.C.M.G., Governor of Bombay and President of the Congress, to ask Prince d'Arenberg, President of the Suez Canal Company, for a full official statement of the results there; and your readers should know that Prince d'Arenberg informs me not only that he will give such particulars (which I hope may satisfy even Indian sceptics) but that he will be glad to accept a commission of inquiry at Ismailia at the most unhealthy time of the year to verify those results.

It is surprising that the Sanitary Commissioner with the Government of India should not already have taken the trouble to make such an inquiry. Instead of that the Mian Mir affair has been allowed to damp anti-malaria work in India for five years. I have therefore suggested that the Government of India should make an impartial inquiry into the latter campaign also. It is time that the authorities obtain clear ideas on these subjects.

I must point out in conclusion that Major James's paper tends to throw as much discredit on quinine prophylaxis as on mosquito reduction. I am, Sir, yours faithfully,

University of Liverpool, April 4th, 1909.

RONALD ROSS.

* * We have received from Professor Ronald Ross extracts from the *Allahabad Pioneer* dated March 12th and March 13th, containing letters from Colonel Waller Barrow and Lieutenant-Colonel H. D. Rowan respectively. We do not think we can attempt to summarise these communications—presumably their authors have made them as brief

as they know how; but Professor Ross is right in saying that both officers regret Major James's attitude and dispute his conclusions.—ED. L.

McBURNIE'S METHOD OF CONTROLLING HÆMORRHAGE DURING DISARTICULATION AT THE HIP-JOINT.

To the Editor of THE LANCET.

SIR,—I can cordially endorse all that has been said in your issue of THE LANCET of April 3rd regarding the control of hæmorrhage during disarticulation at the hip-joint by intraperitoneal compression of the common iliac artery. Some years ago it struck me that the method suggested by McBurnie was a most excellent one, and in a case of sarcoma of the femur I employed it with complete success. In the *Scottish Medical and Surgical Journal* for 1902 I gave a brief outline of this case and drew the attention of the profession to the value of the procedure. I have employed it since and feel sure from my experience of it that intraperitoneal compression of the common iliac artery in disarticulation at the hip has only to be known to be widely employed. In my cases no preliminary ligature of the femoral artery and vein was performed. This is a step which does not seem to me to be necessary.

I am, Sir, yours faithfully,

JOHN MARNOCH, M.A., M.B., C.M. Aberd.

Aberdeen, April 3rd, 1909.

SPONTANEOUS CURE OF THORACIC ANEURYSM.

To the Editor of THE LANCET.

SIR,—Sir Thomas Oliver describes a case of spontaneous cure of thoracic aneurysm in THE LANCET of April 3rd, p. 971, and refers to its rarity. It may be interesting to him and others to hear of another case. I saw one when I was resident medical officer to the Royal United Hospital, Bath, in 1880. A woman was admitted with inspiratory dyspnoea unassociated with any alteration of the voice, and paralysis of the arytenoidæus posticus was diagnosed. There was no history of trouble in the chest and no physical signs pointing to aneurysm or intra-thoracic growth were present. Her death occurred a few days after admission, and at the post-mortem examination we were much surprised to find a perfectly cured aneurysm of the transverse portion of the arch of the aorta; the specimen was placed in the hospital museum, that splendid creation of Mr. Gore, and is probably there now. The case was never reported.

These cases are not only interesting as curiosities but have a great value as showing the possibility of cure of aneurysm of the arch of the aorta. When such cases come under our care we are apt to feel hopeless and almost helpless, but a cure is possible, and it is suggestive that in the case above mentioned the patient had not been laid up in bed—in fact, had not desisted from her usual work. In Sir Thomas Oliver's case the man had only rested for a few weeks at a time, and the other patient quoted, who lived for as long as 12 years, undertook really violent exercise, all of which rather suggests that our present method of treatment by complete rest in bed may possibly be wrong. Has anyone ever seen a cure from such treatment?

I am, Sir, yours faithfully,

REGINALD PRATT, M.D. Lond., M.R.C.P. Lond.

Leicester, April 5th, 1909.

THE CLINICAL VALUE OF HÆMOMANOMETER OBSERVATIONS.

To the Editor of THE LANCET.

SIR,—Dr. William Russell has not yet grasped the fact that the venous blood pressure cannot exceed the arterial, and does not know that the venous pressures which he quotes from Professor Starling are measured in millimetres of salt solution, while the arterial pressures are measured in millimetres of mercury and must be multiplied by 13 to compare with the venous pressures. It is useless for me to continue a discussion with him.

Dr. Oliver Williamson's records are an earnest attempt at