If my memory serves me, Mr. Braine, in a paper read before the Medical Society of London, advocated the employment of Ormsby's inhaler. This instrument is open to the objection that it allows a saturated atmosphere of ether to impinge suddenly upon the delicate and sensitive mucous membrane of the larynx and respiratory tract in general, often giving rise to most alarming dyspnoea from spasm of the glottis. This, then, is one of the many dangers to which ether narcosis is liable, and I think it is matter of moment that, while we warn the unwary against the reckless use of chloroform, we should not clothe ether with virtues which its use will speedily repudiate. When nitrous oxide cannot be used, I think—and the annals of many years of severe testing in University College Hospital bear out my contention—that none of the methods of etherisation can approach that instituted by Mr. Clover, a method alike sound in its scientific basis and convenient for its pre-eminent practicability. Were it competent in this place to consider the question of statistics, it would be my duty to cast some doubt upon the value of such as indicating the relative merits of the two agents, since at present no attempt has been made to arrive at any really accurate return of the number of times ether and chloroform are respectively employed, and of the cases in which death supervenes. Many such cases are not returned at Somerset House as "death from chloroform poisoning." Again, surely "vomiting, nausea, and depression of spirits" are not in many cases trifling ailments. It must occur to all anæsthetists to find persons who evince a peculiar obnoxiousness to ether, and in these many surgical operations could not be performed were ether employed to produce unconsciousness. Nor, again, can straining, sickness, and hiccough, which will every now and again appear, be compatible with the well-being in the post-operation stage of such cases as gastrotomies, &c. Mr. Braine confines himself within such narrow limits that it is impossible for him to do more than offer a very casual glance at the physiological side of the question, and hence it is that his statements, although strictly accurate, yet do not quite cover the whole ground. I may further emphasise the warning given by Mr. Braine by quoting the words of Schiff, the value of whose opinion on this matter can hardly be over-estimated. He says: "Chloroform should be banished from practice as an anæsthetic agent, except in cases in which an extraordinary resistance to the action of ether shows itself."

In conclusion, I would submit that it seems to my mind very doubtful if Mr. Walker is quite accurate in attributing to nitrite of amyl the recovery of his terrier. He employed artificial respiration coëtaneously with the nitrite, and my experience of dogs narcotised with chloroform, which is rather wide, has taught me that artificial respiration, if persevered in for a sufficiently long time, will, in nearly every case, succeed, and if it fails, nitrite fails also. At the same time, as many careful observers have recorded cases which they believe derived benefit from nitrite inhalation, it is unquestionably our duty to try it in every case. The search for amyl nitrite should never, however, be allowed to distract the administrator's attention from performing artificial respiration, which is *the* thing most needful.

I am, Sir, your obedient servant,

DUDLEY W. BUXTON, M.D., B.S.,

Administrator of Anæsthetics in University College Hospital
and at the Hospital for Women, Soho-square.

Mortimer-street, Cavendish-square, W., March, 1885.

ELECTRIC ILLUMINATION OF VARIOUS CAVITIES OF THE HUMAN BODY.

To the Editor of THE LANCET.

SIR,—Allow me to complete the information given in my paper on the above subject, and published in your numbers of the 14th and 21st inst., by the statement that incandescent lamps are now manufactured of the same size as those described in my paper, but of a power of eight volts. By using two accumulators coupled together in connexion with these lamps, an illuminating power is obtained which rivals in brilliancy the hydro-oxygen light. [The coupling of the accumulators is effected by connecting the positive pole of the one with the negative pole of the other by means of a small piece of copper wire. The wires connected with the handle of the instrument are then attached to the free poles.] Messrs. Weiss and Son will soon receive a supply of these lamps.

As several letters dealing with the question of warming the laryngoscopic mirror have been recently published in your columns, I wish to state once more distinctly, that the mirror of the electric laryngoscope can be warmed in exactly the same manner as the common laryngoscope—i.e., by holding it over a gas, oil, or spirit lamp, or by dipping it into warm water, *after* it has been attached to the universal handle. No danger of the incandescent lamp cracking or of other accidents happening is to be apprehended.

I am, Sir, yours obediently,

FELIX SEMON.

Welbeck-street, Cavendish-square, W., March 22nd, 1885.

LEACH AND ROOKE MEMORIAL FUND.

To the Editor of THE LANCET.

SIR,—A proposal has of late been made to collect a fund for putting up in our new chapel a window to the memory of Mr. Harry Leach and Dr. Henry Rooke, who were both for many years connected as medical officers with this institution. On behalf of a committee formed by our physicians and surgeons, I beg to bring this project under your notice, and to suggest that we would be pleased to receive any kind help in our endeavour to keep up the memory of these former members of our medical staff, who, during their long association with the Seamen's Hospital, were so widely esteemed.

I am, Sir, yours truly,

W. JOHNSON SMITH.

Seamen's Hospital, Greenwich, March, 1885.

The following subscriptions have been received or promised in furtherance of the fund:—

£ s. d.	£ s. d.
Dr. Robert Barnes, Consulting Physician, Seamen's Hospital ... 2 2 0	Dr. Robert Farquharson, M.P. ... 1 1 0
G. Busk, Esq., Consulting Surgeon ... 2 2 0	W. Johnson Smith, Esq. ... 2 2 0
Dr. John Curnow, Visiting Physician ... 1 1 0	John Croft, Esq. ... 2 2 0
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G. R. Turner, Esq., Visiting Surgeon ... 1 1 0	Dr. Collingridge ... 2 2 0
	W. M. Corner, Esq. ... 1 1 0
	John Tweedy, Esq. ... 1 1 0
	Dr. Ralph Gooding ... 1 1 0
	Dr. William Walker ... 1 1 0
	THE LANCET ... 2 2 0

MEMORIAL TO DR. FAIRLIE CLARKE.

To the Editor of THE LANCET.

SIR,—Some of the friends of the late Dr. Fairlie Clarke, desirous of evincing their esteem for him, and wishing to perpetuate his memory in some practical manner, have undertaken to erect a drinking fountain in Southborough, where he spent the last eight years of his life. They have come to this decision because among his papers were found plans for a drinking fountain, with the view to the erection of one in this town, and because they feel sure that, to all who knew him, it will commend itself as a suitable memorial. At present donations amounting to £80 have been promised, and if any of your readers would like to subscribe to this fund, subscriptions will gladly be received by the Rev. H. J. Bigsby, Rev. T. A. E. Williamson, General Rowlett (all of Southborough, Tunbridge Wells), or

Yours faithfully,

H. VERR PEARSON, Treasurer.

Park-road, Southborough, Tunbridge Wells, March 21st, 1885.

LIVERPOOL.

(From our own Correspondent.)

THE NEW LYING-IN HOSPITAL.

FOR upwards of forty years there has been in Liverpool a lying-in hospital, and for nearly a century a maternity charity for attending poor married women at their own homes, this latter being known as the Ladies' Charity. Each has had its supporters and advocates, while the former has also had its opponents. The new hospital is an honest, and so far a very successful, attempt to give the patients all the benefits of a lying-in hospital without any of its dangers. It consists of two detached cottage hospitals, situated respectively east and west of the central building,