at first glance another case of Saul amongst the prophets to find Dr. Campbell hinting that man's adaptability and skill, coupled with a growing moral sense, may "one day perhaps lead him to refrain altogether from eating that which has once throbbled with sentient life."

Sentimentalism has been defined as an aversion to face realities; it is also laid to the charge of those who feel repugnance in the thought of eating the produce of the shambles. Perhaps it is true that those who are most active in propagating anti-slaughterhouse doctrines bear the concomitant stigmata of the "crank": there was never a cause that has not suffered from the zeal of its promoters. But I have from time to time remarked in circles of ordinary refinement, to whom the advice *pas trop de zèle* has become a rule of life, symptoms of scruples hitherto associated with persons lean of visage and long of hair, who wear soft hats and homespun cloaks. Such expressions as "I am a vegetarian in theory though I find it difficult to become one in practice" have been current among cultured people even before the reports of THE LANCET Commissioner on the Chicago meat industry and "The Jungle" were published.

It may be undue sensitiveness to be affected at the thought of profiting by the vicarious suffering of the lower animals; it is probably true that each living creature is striving to usurp the whole earth with its own progeny (if some "prudent" sections of civilised man be excepted). But if man has really soared so high above the rest of living species, must he be for ever like the rest of nature, "red in tooth and claw," to maintain his survival? I am not one of those who expect to cull the flower from every cotyledon: that is where the enthusiast comes to grief. But I am at one with Dr. Campbell in his belief that the trend of human evolution will gradually lead man away again from his "highly animalised diet," and that without reducing his physique, as some threaten, to the standard of the "pot-bellied Hindoo."

I am, Sirs, yours faithfully,

Hampstead, N.W., Nov. 1st, 1906.

J. S. MACKINTOSH.

To the Editors of THE LANCET.

SIRS,—The great importance of the subject leads me to ask to be allowed to add a few supplementary lines to my letter under the above heading in your issue of Oct. 20th, p. 1095. At that time I believed that Dr. W. A. Potts, in describing the Japanese "at the period of their grandest achievements" as vegetarians, was wrong. I have verified my belief and I can now state on the best authority that in the war between Japan and Russia the dietary of the Japanese soldier comprised a daily ration of meat, fresh or preserved. Moreover, to quote an official excerpt, "when the supply of cattle or fish or fowl is abundant at the place where the troops are quartered the ration of fresh meat may be increased by the authority of the general officer commanding." The other constituents of the Japanese soldiers' diet appear to be abundant and varied, and it is noteworthy that the officer and private are allowed the same free rations.

I am, Sirs, yours faithfully,

Worthing, Nov. 6th, 1906.

WATKIN W. JONES.

To the Editors of THE LANCET.

SIRS,—Dr. Harry Campbell does well to call attention to the chaotic state of the food question. I wish he could see his way to put things in their true positions and hold even balance between conflicting theories—he would earn the gratitude of all general practitioners. For a long time, under the influence of the Haig theories I induced—I may say implored—many patients to submit to his somewhat frugal rations. I had many satisfactory results. One day at a Masonic banquet I sat next to a distinguished food specialist, and whilst we consumed purins and other dainties he referred to Haig's theories, pronouncing his chemistry all wrong and his conclusions absurd. Too ill-informed fully to understand, much less refute, his arguments I could only suggest leaving the matter to time the great arbiter. But, alas, the iron of doubt had entered my soul and my patients were soon treated to such purin-infected dainties as sweetbreads, &c.

Still seeking after truth I came across Rabagliati's book, "Air, Food, and Exercise." He, you may remember, is of the carboniferous school and attributes a large number of diseases—from eczema to cancer—to an excess of carbonaceous material in the diet. Whether in this connexion

after reading Hare's work "The Food Factor in Disease," I shall get more light or more confusion remains to be seen.

Finally, I was much impressed with Dr. W. A. Potts's article, "Notes on Purin-free Diets," and promptly took it to a lady patient of a scientific turn of mind. Unfortunately, I was not prepared, as I ought to have been, for her first question, "What are purins?" I could only murmur that they were chemically allied to certain products contained in urine. Of course, this reply was not too happy and perhaps a little hard on the purins.

In all fairness I must now take her Dr. Campbell's letter, lest perchance I may have started the household on some unhappy gastronomic experiment. Everything Dr. Campbell writes is thoughtful and suggestive and nothing more so than the concluding lines of his letter. He says: "And it is this adaptability and this skill [in cultivating and preparing food], *fortified by a growing moral sense* [the italics are mine], which will one day perhaps lead him to refrain altogether from eating that which has once throbbled with the pulse of sentient life. This may come: this ought, I think, to come." Now, there is no ambiguity about this: it is the voice of the "gentle" Buddha. The same compassion of the strong for the weak and lowly placed: for those who, like ourselves, are "on their upward way." And if a growing "moral sense" shall so influence man in regard to his food, will it not also influence him in regard to experimental research? Then, where will vivisection be? And how stands Dr. Campbell in regard to it?

I am, Sirs, yours faithfully,

Oct. 29th, 1906.

J. S. B.

THE WORKMEN'S COMPENSATION BILL (AS AFFECTING THE GENERAL PUBLIC).

To the Editors of THE LANCET.

SIRS,—By your courtesy I was enabled in THE LANCET of Oct. 13th to place before the profession the purely medical aspects of the above Bill, but it has occurred to me that it may be of interest to many of your readers to have before them the points of the Bill which will affect the general public who are either employers or employed.

I presume that most of your readers have in one way or another become acquainted with the present Act during the eight and a half years it has been in force; I need not therefore do more than refer to those parts of it which are either repealed or altered in the Bill which is now being considered by the House of Commons. Nearly all the limitations of the present Act, which have proved to be such fruitful sources of litigation, have been swept away. It will no longer be necessary for a workman to be employed on a building in course of erection exceeding 30 feet in height, or on a scaffolding, or where machinery is used, for him to be able to claim compensation for personal injury by accident occurring to him when in course of his employment. By the present Bill every employer will have to compensate any employee of any kind, workman or not (with certain exceptions), who is receiving wages or salary amounting to £250 per annum or under who is injured by accident in the course of his employment, paying him half wages during his total disability, such half wages not to exceed £1 per week. These payments will have to be made as long as the total disability lasts, unless they are commuted by arrangement under certain regulations. If the disability continues but the employee is able to do some lighter work than he was able to do before the accident the weekly payment may be reduced by a county court judge, proportionately to the lighter work the claimant is able to do. A medical referee will in disputed cases assess a claimant's power of work and his decision will be final. In the event of death resulting from injury by accident the employer will have to pay to the workman's dependents a sum equal to three years' wages or £150, whichever of these sums is the larger, but not exceeding in any case £300. Under the Bill the extension of scope is so much beyond the present Act, and is of such importance to all, that I think it better to quote Clause 13 *in extenso*.

"Workman" does not include any person remunerated by salary at a rate exceeding £250 a year, or a person whose employment is of a casual nature and who is employed otherwise than for the purposes of the employer's trade or business, or a member of a police force, or an outworker, or a domestic servant, or a member of the employer's family dwelling in his house, but, save as aforesaid, means any person who has entered into, or works under, a contract of service or

apprenticeship with an employer, whether by way of manual labour, clerical work, or otherwise, and whether the contract is expressed or implied, is oral or in writing.

It will be seen from this that medical assistants and dispensers, clerks, shop assistants, and travellers, as well as workmen of all kinds, grooms and gardeners, will be able to claim under the proposed Act. I suppose also curates, tutors, and governesses, who are certainly not domestic servants, will also be able to claim.

From the foregoing it will be seen that if the Act comes into force on Jan. 1st, 1907, as is proposed, a very large number of medical men will have to insure, unless they like to take the chance of being rather heavily hit. Luckily, I believe the rates of insurance will not be prohibitive, but after the passing of the Act certainly it will be wise to inquire what premium will cover any individual risk and to obtain a policy of indemnity if possible. I would urge, however, that until the Bill has passed medical men should retain an open mind and not in any way promise to insure with any particular agent or insurance office. The rates of premium have yet to be fixed and many questions will arise that will need careful consideration.

I am, Sirs, yours faithfully,

ALBERT BENTHALL, F.R.C.P. Edin., &c.
South Hampstead, N.W., Nov. 1st, 1906.

"THE PROFESSION" IN PUBLIC ESTIMATION.

To the Editors of THE LANCET.

SIRS,—The profession owes Sir Dyce Duckworth no small debt for plainly stating its social decadence. If he suggests no remedy, it is perhaps because the remedy is obvious. The British public, in spite of all its present literary shortcomings, retains a wholesome reverence for general education, and a profession whose standard of general education at entry is no better than that of the pharmaceutical chemist and veterinary surgeon need feel no surprise or displeasure at being classed with its literary equals. A great deal of nonsense is often talked about the educational value of the medical curriculum and about the mind deriving an equal, though a different, culture from "science" and from "the humanities." The effects of the two on the mind are absolutely distinct. To attempt to replace "the humanities" by "science" is just as sensible as the reverse process, and is much the same as to discard one's necktie because one has bought new bootlaces. "An educated man" in the old English sense will never be produced by cutting up frogs or making smells in a laboratory. He can only be produced—as he always has been produced—by a study of the experience of the past, of the greatest thoughts and deeds and lives of the race, and by letting the mind dwell most, during its most impressionable period, on noble and beautiful things. If the profession wishes to be thought a profession of "gentlemen" let it insist that those now entering it shall have the traditional "education of a gentleman." Much as the General Medical Council has done to improve medical practice in this country, its deplorable weakness, in permitting the educational, and therefore the social, decadence of the noblest of callings, is something which cannot be condoned.

I am, Sirs, yours faithfully,

Exeter, Nov. 3rd, 1906.

W. GORDON.

THE WORKING OF THE SALE OF FOOD AND DRUGS ACTS.

To the Editors of THE LANCET.

SIRS,—The annotation on this subject in THE LANCET of Nov. 3rd appears to require both a correction and an amplification. The correction refers to the alleged "difficulty of" a private purchaser "complying with the requirements of the Act in regard to the formula to be observed at the time when the purchase is made." Your contributor has lost sight of the important judgment given in *Buckler v. Wilson*, (1896) 1 Q. B. 83, in which it was clearly laid down that the purchaser of a commodity *for consumption* can send the same, or part thereof, for analysis and take proceedings under the Acts, without going through the "formula" of declaration, division of sample, &c., prescribed by Section 14 of the Act of 1875. Moreover, it appears that it is not necessary that the analysis should be made by the public

analyst of the district as required by Section 12 of the same Act. A lucid annotation on the point, too long to be quoted here, is to be found in Bell and Scrivener's "Sale of Food and Drugs Acts" (p. 38, ed. 1900), which makes the above contention clear and gives a list of the cases prior to and since the case quoted. The amplification which I would suggest is a reference to the provisions of Section 14 of the Act of 1899, under which the purchaser of any commodity (food or drug) can obtain the services of the local inspector, who will *on request* take a sample of the commodity on delivery at the purchaser's house. I have frequently directed attention to these provisions and think it is a misfortune that so little (practically no) use is made of them. That there is scope for work under the section is, I think, amply demonstrated by the figures given in your annotation.

I am, Sirs, yours faithfully,

Maida Vale, W., Nov. 3rd, 1906.

REGINALD DUDFIELD.

* * Our correspondent is right. It was decided in 1896 that the provisions of Section 14 do not apply to the case of a private purchaser *purchasing for consumption*. When, however, a sample is taken by an official purchaser for analysis the provisions of Section 14 must be strictly complied with. We agree with our correspondent and repeat what we said in the annotation referred to that "it is a pity that 'customers' do not more often submit samples to analysis."—ED. L.

INFANTILE MORTALITY AND GOATS' MILK.

To the Editors of THE LANCET.

SIRS,—In my paper on Infantile Mortality and Goats' Milk published in your issue of Nov. 3rd I stated that the infantile death-rate of Italy was 66 per cent. less than that of our own country and that of Norway was 44 per 1000. I find that my information was incorrect and that the figures should be 14 per cent. above and 75 per 1000 respectively. These alterations do not affect, however, the validity of my arguments in support of the feeding of infants on goats' milk as opposed to sterilised depôt milk.

I am, Sirs, yours faithfully,

Glasgow, Nov. 5th, 1906.

WILLIAM WRIGHT.

ANOTHER CASE OF ACTINOMYCOSIS.

To the Editors of THE LANCET.

SIRS,—It is rather significant that a day or two after I had corrected the proof of a paper on a case of actinomycosis of the cheek I should meet with another case of the same disease also on the cheek. This appears to offer a proof that it is necessary to be familiar with the external appearances of the swelling caused by this disease in order to recognise the disease in its earliest manifestations. I shall give a brief history of the case and shall no doubt be able to supplement these notes at a later date when the patient has had an opportunity of benefiting from the administration of iodide of potassium.

Last August the patient, a man, aged 22 years, noticed a swelling on the inner side of the left cheek which after a week or ten days discharged into the mouth; the swelling diminished somewhat in size but did not altogether disappear; it left two hard nodules on either side of the opening. About Oct. 17th he noticed that the induration around the lumps was increasing in size and shortly afterwards two nodular masses appeared on the outer side of the cheek midway between the upper and lower teeth; these gradually became larger until the lower one began to soften and point outwards. He consulted me on the evening of Oct. 25th and the following appearances were noted. His height was 5 feet 4 inches and he weighed 8 stones 4 pounds. The teeth on the lower jaw were decayed, especially on the right side; on the left side two lower molars were missing; one rather rugged stump was situated close to the area of the early abscess in the mouth; the mucous membrane was puckered and cicatricial between the upper and lower teeth. Externally there was a large indurated swelling situated between the two jaws and extending down to the lower border of the lower jaw, irregular in outline, and having two nodular swellings of about the size of a small nut situated one above the other;