

opinions as to the desirability of cleanly administration, but there is surely a far cry between this admission and the association in question. In matters bacteriological I see no shame in admitting that I am "a child," and for this reason I was careful not to give my own opinions, but, as the context showed, the opinions of leading authorities. Whether the opinions of Crookshank and Sternberg are accepted by modern physicians is a matter for the modern physicians themselves to determine; it is true, of course, that Crookshank's last edition is now a few months old, and many theories may have been advanced since then. The diatribe against the Clover's inhaler, quoted by Mr. Lucas, is, I fancy, not unknown even in this (anæsthetically) degenerate Western hemisphere, but it loses much of its force when we recollect that almost precisely similar invective may be directed against any surgical instrument or surgical procedure. Anyone who cares to take the trouble can clean, boil, or superheat a metal inhaler with ease, and, on the other hand, a surgical instrument in careless hands may become the very acme of all that is foul and filthy; the antiseptic process itself has been condemned because of failures consequent upon faulty technique.

I have the honour to remain, Sirs, your faithfully,

J. FREDK. W. SILK.

Devonshire-street, Portland-place, W., April 5th, 1897.

"AN UNDESCRIBED SYMPTOM."

To the Editors of THE LANCET.

SIRS,—In connexion with Mr. Battle's paper in THE LANCET of March 27th, "An Undescribed Symptom in Peritonitis," it may be of interest if I briefly describe a very similar case which I recorded in THE LANCET of May 10th, 1890, p. 1015, under the title of "An Unusual Case of Strangulated Hernia." A middle-aged man suffering from strangulated hernia was admitted into the General Hospital, Birmingham, under the care of Mr. Haslam, to whose courtesy I was indebted for permission to publish the case. The man's general condition was very much the same as that of Mr. Battle's patient. He was in a condition of collapse and could hardly answer questions, so it was difficult to get a history. His abdomen was distended, motionless, and tympanitic. Over the lower part of it was an cedematous swelling. The swelling occupied both groins, especially the right, and extended into the perineum as far as the base of the triangular ligament. The scrotum was swollen and tense. The swelling on the abdomen was limited towards the thighs by Poupart's ligament. The whole appearance was so like that produced by extravasation of urine that more than one surgeon who saw the case was inclined to make that diagnosis rather than the one of strangulated hernia, to which other symptoms pointed. The patient was placed under chloroform, and an incision over the right inguinal region showed a hernia of the small intestine. The gut was gangrenous and piebald in colour, though it had not given way. The sac was full of purulent fluid. The tissues over the sac were also infiltrated with fluid. The bladder and urethra were examined, but no extravasation of urine was found. They were quite healthy. The patient was now in a moribund condition, or the abdomen would have been opened and washed out. He died a few hours after. A post-mortem examination showed extensive suppurative peritonitis which had probably started in the hernial sac.¹ The condition of cedema was almost exactly like that which Mr. Battle describes. In both cases the symptoms appeared in a "late stage of the disease" and "indicated a very intense inflammation of the peritoneum." In future cases of the kind the bacteriology ought to be carefully worked out.

I am, Sirs, yours faithfully,

Hove, March 29th, 1897. D. R. P. STEPHENS, F.R.C.S. ENG.

"SHOULD EPILEPTICS MARRY?"

To the Editors of THE LANCET.

SIRS,—Any one knowing much of epileptics—whether suffering from immediate traumatic epilepsy or transmitted (?) or obscure epilepsy—must know that even the best of them are quite unfitted for responsibility. They may be skilled up to certain points in music, art, literature, or manual work; but they are always subject to fits of more or

less irresponsibility, they are always uncertain and not to be relied upon, and thus are quite unfit to have the training or hold the destinies of others in their hands. Thanking you in anticipation for your courtesy in giving my letter room,

I am, Sirs, yours faithfully,

MABEL ANDERSON, Lady Superintendent.

Meath Home for Epileptics, Godalming, April 3rd, 1897.

THE PROPHYLACTIC VALUE OF QUININE IN MALARIA.

To the Editors of THE LANCET.

SIRS,—I am reported in THE LANCET of April 3rd as having drawn attention, in a note upon Central African malaria, read before the Liverpool Medical Institution, to the "prophylactic value of small daily doses of quinine sufficient to cause slight aural disturbance." In discussing the prophylactic measures adopted by me in Central Africa, I gave a certain amount of credit to the exhibition of small daily doses of quinine, commenced at sea before entering the country and continued whenever the line of march lay along the course of low-banked rivers or cut across marshes or alluvial plains at a watershed foot. The doses were quite small, about four grains per diem, and were never pushed to the causation of symptoms.

The physiological index is of great value in the treatment of actual febrile manifestations. The personal equivalent being such an uncertain factor, it is impossible to lay down an unalterable dosage of quinine which will be applicable to all cases and which will yield universally good results. In two patients, under the same external conditions, suffering from malarial fever of the same type, a dose which will be quite effective in one may show little or no good in the other. In Central Africa it was found after experience that the best clinical results were obtained by apportioning to each individual such an amount of the drug as sufficed to produce in him an aural disturbance indicative of the commencement of quinism.

I am, Sirs, yours faithfully,

STANLEY KELLETT SMITH, F.R.C.S.,
Late Surgeon, Rhodesia Exploratory Expedition to
Central Africa.

Liverpool, April 5th, 1897.

"THE MIDWIVES REGISTRATION BILL."

To the Editors of THE LANCET.

SIRS,—It would seem useless to repeat arguments against midwives registration worn absolutely threadbare from reiteration. Nevertheless, as some of your correspondents appear to take an *ex parte* view of the scheme, may I offer a few remarks? Nobody can dispute that melancholy casualties occur at rare intervals from employing the Gamps—which, after all said, is only equivalent to having no attendance at all; but it is curious to note how the registration schemes have recently unearthed a state of affairs—i.e., the dire mortality due to Gamps—that nobody until quite lately seemed aware of. It should appear quite self-evident that if these fatalities exceed anything beyond rare occurrences the Gamps would not have held their own for so many generations past in country and other places where they have plied their craft, seeing how pronounced fatal cases of midwifery are. Further, if otherwise, it is impossible to conceive that in Continental countries where civilisation runs parallel with our own, and where legislative restraint has been at play for many years past, the mortality should exceed that of our own country. I am aware that certain undetermined factors such as contracted pelves, &c. (as amongst the Germans), have to be taken in to consideration; but it is preposterous to contend that these slender factors would suffice to strike a balance of mortality in favour of our own country if the damage due to midwives was anything like that represented by the witnesses who gave evidence before the Select Committee of the House of Commons. Granting, therefore, that I am correct in stating that the fatalities due to midwives are rare, I should like to ask Mr. Humphreys and his followers if such retrograde and revolutionary measures as the public have been edged on to anticipate are not likely to produce a greater mortality, taking all things into consideration, than already exists. I have remarked that the employment of Gamps is equivalent to having no attendance at all; but of what earthly use is it employing a registered

¹ I have not the report of the case by me, but my memory is very clear as to the above described symptoms.