will be under the charge of Captain Pinch, to whom all communications should be addressed. It is not intended to keep the exhibition open longer than one month, beginning Oct. 1st. Exhibitors are invited to be responsible for the removal of their drawings, but false-backed frames will be provided for their secure exhibition under glass whilst displayed. The exhibition is open to all members of the profession on presentation of card, but those who desire to consult it more than once or to attend any lectures that may be given are invited to subscribe to the Polyclinic funds the sum of 1 guinea.

I am, Sir, yours faithfully,

JONATHAN HUTCHINSON.

The Polyclinic, Chenies-street, Sept. 14th, 1908.

RUPTURE OF THE LIGAMENTUM PATELLÆ.

To the Editor of THE LANCET.

SIR,—The statement in your annotation under the above heading in THE LANCET of Sept. 12th, p. 825, that rupture of the ligamentum patellæ has seldom been recorded has prompted me to send you the notes of the following case.

A man, aged 29 years, on Nov. 11th, 1902, slipped and fractured his right patella. No operation was performed and he recovered with very fair movement in the knee, being able to carry on his ordinary employment quite well. On August 13th, 1907, he slipped and fractured the same patella again. I saw him with Mr. A. J. D. Riddett and advised operation. This was performed a week later, when it was found that the second fracture was through the middle of the upper fragment, the original fracture being firmly united with fibrous tissue with half an inch interval between the fragments. The edges of the recent fracture were sawn off and then wired firmly together; the fibrous union of the original fracture was not interfered with. The result was quite good and the man returned to his work after three months, which he carried on till August 29th, 1908, when he slipped once more and felt his knee go again.

I again saw him with Mr. Riddett and found a lot of effusion in and round the joint with total inability to lift the leg. We decided to operate again, especially as the patient wished it, saying that his leg had felt much stronger since the last operation. On opening up the old scar we found that the patellar ligament was torn right through just below the attachment to the patella. The second fracture was found to have united with firm bony union. The old silver wire was removed and the ligamentum patellæ fixed firmly to the lower border of the patella with silver wire and some silk sutures. The original fracture was in the same condition as at the previous operation. The wound has now healed and it will be interesting to see what the functional result will be and also whether it will be the quadriceps tendon's turn to go the next time he falls.

I am, Sir, yours faithfully,

Leicester, Sept. 12th, 1908.

F. BOLTON CARTER.

THE VARIATIONS IN THE PHAGOCYtic POWER OF LEUCOCYTES FROM DIFFERENT INDIVIDUALS AND ITS BEARING UPON THE OPSONIC INDEX.

To the Editor of THE LANCET.

SIR,—Sir A. E. Wright has stated that "we may take the opsonic index of any blood as an index of the patient's power of phagocytic response."¹ According to this one person is less resistant to a staphylococcal infection than another, partly because his blood is deficient in opsonin, certainly not because there is an inherent deficiency in the phagocytic capacity of the leucocytes themselves.

In a paper read by two of us (E. E. G. and W. Y.) before the Pathological Society of Great Britain and Ireland in January, 1908, we stated that the phagocytic power of the leucocytes of one individual may constantly differ from that of another individual. This was tested according to the technique of Wright with an emulsion of staphylococcus albus.

¹ THE LANCET, August 17th, 1907, p. 427.

We have recently made further observations upon the blood of two individuals, "A" and "G," estimating the degree of phagocytosis to staphylococcus obtained with (1) "A's" and "G's" serum respectively with the *same* leucocytes—i.e., comparing the opsonising influence of the serum upon phagocytosis; (2) "A's" and "G's" leucocytes respectively with the *same* serum—i.e., comparing the influence of the leucocytes upon phagocytosis; and (3) "A's" serum with "A's" leucocytes and "G's" serum with "G's" leucocytes—i.e., comparing the total phagocytic power of the blood. Three indices were calculated in this way, using "G" as control at intervals of three days for one month. On July 20th, for example, "A's" indices were the following: (1) 1.15 (mean of three separate observations), (2) 0.83 (mean of three separate observations), and (3) 0.98 (mean of two separate observations). Therefore, though "A's" opsonic index was definitely above that of the control the total "power of phagocytic response" was practically equal, because "A's" leucocytes were deficient in inherent phagocytic power. "A's" and "G's" red corpuscles were not agglutinated by any of the sera used; systematic examination of their blood revealed no leucocytosis.

We intend at an early date to publish a detailed account of the observations we have in hand and the conclusions we have arrived at.

We are, Sir, yours faithfully,

ERNEST E. GLYNN, M.A., M.B. Cantab.,
M.R.C.P. Lond.,

Lecturer in Clinical Pathology and Morbid Anatomy, University of Liverpool; Pathologist to the Liverpool Royal Infirmary;

WARRINGTON YORKE, M.B., Ch.B. Liverp.,
Late Holt Fellow in Physiology, University of Liverpool;

G. L. COX, M.A., M.B. Cantab.,

Holt Fellow in Pathology, University of Liverpool.

August 24th, 1908.

A PERSONAL MATTER.

To the Editor of THE LANCET.

SIR,—My attention has been directed to the recent distribution, for advertising purposes, of a pamphlet bearing my name. The facts are as follows:—

In 1906, when acting as foreign editor of a medical journal, the editor asked me to make an abstract of an article in the *Berliner Medizinische Klinik* by Professor Gumpert. The abstract was published as an article under my name, although I had given no authority therefor; it is the only time my name has appeared in this journal. Copies of my abstract were bought, I believe in good faith, from the journal in which the abstract appeared, the sale being without my consent or knowledge. The heading "A Contribution, &c. By T. P. Beddoes," has led many to conclude that I claim the credit of the original work described, which is entirely due to Professor Gumpert and his collaborators.

Yours faithfully,

Sept. 14th, 1908.

T. P. BEDDOES.

* * We should be interested to learn the name of the medical journal.—ED L.

THE PREVENTION OF TUBERCULOSIS (IRELAND) BILL.

To the Editor of THE LANCET.

SIR,—May I say that I believe your attitude with regard to the Compulsory Notification Clauses of the Irish Tuberculosis Bill is entirely wise? Unlike Sir John Byers, I am not a professor of midwifery, but, after all, a medical man who is a member of a sanitary authority is perhaps in closer touch with the prejudices of people who will be affected by the Bill.

Knowing what I do of the Irish people, I believe that the Compulsory Notification Clauses will excite so much suspicion and dread as effectually to undo any good result heretofore obtained from the tuberculosis campaign. People simply will not go to a medical man if they think that by so doing they may be listed as tuberculous. I fully recognise that the anti-tuberculosis movement in Ireland has done much good, but it has a source of weakness in not being largely controlled by those in close touch with the popular party—and thus its

success can quickly be changed to failure. My experience of public boards in Dublin leads me to think that it is very easy for a medical man who happens to be a member of such a board to induce his colleagues to undertake considerable sanitary reforms if they are satisfied he is acting unselfishly. Thus, the South Dublin board of guardians has erected, on my motion, a well-equipped tuberculosis hospital under Dr. Dunne, and the Dublin corporation has also, on my initiative, determined to devote the product of 1*d.* in the pound out of the rates every year on a sanatorium, for which a site has already been selected. But members of such boards are prone to suspicion, and it is difficult to assure them that a practitioner is entirely unbiassed if he advocates a system of notification which will put half-crowns in his pocket, whilst it impales for life the person notified.

I am, Sir, yours faithfully,

J. C. MCWALTER, M.D. Brux., M.A.,
F.F.P.S. Glasg., D.P.H.,
Alderman, City of Dublin.

Dublin, Sept. 13th, 1908.

IS COWPER FORGOTTEN ?

To the Editor of THE LANCET.

SIR,—A few weeks ago, by the courtesy of the press, I invited subscriptions to a fund to enable the committee of the Cowper and Newton Museum, Bucks, to place that memorial of the poet and his friend upon a substantial basis. We need about £2500, and the newspapers of the United Kingdom, of the Colonies, and the United States of America have been most kind in their hospitality. Up to the present time we have received £3 in subscriptions. One may well ask, Have we forgotten Cowper, the gentle poet, the author of "John Gilpin," "The Task," and of so many beautiful hymns, including "God moves in a mysterious way" and "Hark, my soul! it is the Lord"? We are not disheartened yet; we are waiting for the English-speaking people of the world to come forward and provide this modest sum of money.

The secretary is Mr. Thomas Wright, to whom subscriptions should be addressed. His address is The Cowper and Newton Museum, Olney, Bucks.

I am, Sir, yours faithfully,

JOHN COLLINGRIDGE.

Aldersgate-street, London, E.C., Sept. 9th, 1908.

CONTROL OF DISINFECTANTS.

To the Editor of THE LANCET.

SIR,—Our attention has recently been called to the fact that in several of the tender forms calling for supplies of disinfectants issued by medical officers of health, among them those of the City of London and the borough of Holborn, one of the conditions imposed requires that the disinfectant *shall not separate out on standing*. We wish to draw the attention of your readers to the indefiniteness of such a condition, although we agree that it is very important, in the interests of public health, that disinfectants should, when mixed with water, form a permanent emulsion, especially as in many cases the disinfectant solution is kept for some time before use.

In many of the disinfectant emulsions commonly used in this country the active ingredient will separate out on standing under certain conditions of time, temperature, and dilution. In our several laboratories we have endeavoured to ascertain the relative value of disinfectants from this point of view by taking the precaution of making the test, which is known under our names, on 1 per cent. solutions or emulsions of the disinfectant after such dilution has been allowed to stand for 24 hours prior to the test being made, and we therefore venture to suggest that in order to insure uniformity of result our practice should be followed by other workers—viz., that before applying the Rideal-Walker test to a disinfectant a 1 per cent. solution should be prepared at normal temperature in an ordinary one-mark stoppered litre flask, such as is used in volumetric analysis, the portion required for further dilutions in the test to be pipetted from the top of the flask after 24 hours' subsidence, avoiding the withdrawal of any insoluble matter which may be floating on the surface.

We are, Sir, yours faithfully,

SAMUEL RIDEAL.

J. T. AINSLIE WALKER.

Chemical Laboratory, Victoria-street, Westminster, S.W.,
Sept. 9th, 1908.

A RECENT ALTERATION IN THE MEDICAL DIRECTORY.

To the Editor of THE LANCET.

SIR,—The receipt of the usual slip sent out annually for correction by the editors of the Medical Directory prompts me to ask for a little of your space in order to protest against a recent alteration (made I think for the first time last year) which to my mind is far from being an improvement. I refer to the "Local List" for London which follows the alphabetical list of names. Formerly the names in this local list were given under the streets with, I fancy, the numbers of the houses. Now, I suppose with the idea of saving space, the names are given in many instances under districts—e.g., Camberwell—without any indication of the streets or numbers. With regard to the streets there does not seem always to be a very definite plan. It is surely absurd that the name of Dr. A who resides in Devonshire-street should be found under that street whilst if one seeks for Dr. B who lives in Devonshire-place it is practically impossible to find him, Devonshire-place being omitted. It is true that the name is entered under Portland-place but how can one possibly guess such a conundrum? Again the massing together of names under districts is most inconvenient—indeed, practically useless. I beg you, Sir, to use your influence to persuade the publishers of this otherwise most useful work to return to their former arrangement.

I am, Sir, yours faithfully,

Sept. 13th, 1908.

NON ŒDIPUS

A QUESTION OF SOBRIETY.

To the Editor of THE LANCET.

SIR,—I am sorry to find myself at variance with so distinguished a physician as Dr. C. A. Mercier¹ as regards the different influences of drink on sober and drunkard.

Most people would, I suppose, call me sober—I hardly ever touch intoxicating liquor except with the definite intention to be sociable. I keep a good whisky and a tolerable port in case any friends drop in, but I do not suppose I have got through a bottle of whisky this year by myself. It was not ever thus. 15 or 20 years ago I drank as much as my neighbours and liked it—I found it increased sociability at the time but impaired work afterwards. I found that the more alcohol I drank the more I wanted to drink—one split or one cocktail was very little good, it only wetted the palate and whetted the thirst for another. Further, the expense I found considerable. So to my very great regret I concluded I had to give up drink almost altogether and I did do, swayed not by inclination but by prudence. I cannot assign myself to the class mentioned by Dr. Mercier who cannot get drunk if they try, and this although I have never tried. A cousin of mine might at one time have been almost described as a drunkard. His own self-control was not enough to keep him straight, but he married and his wife reinforcing his self-control he is now undoubtedly sober. I venture to think that Dr. Mercier's is one of those hypotheses which may do great harm and should not be sown broadcast till they are completely proved. It is much safer to preach to the drunkard that the fault is in his own weakness and that heaven helps those who help themselves. Somewhat naturally, I do not sign my name.

I am, Sir, yours faithfully,

August 27th, 1908.

M.D.

¹ THE LANCET, August 8th, 1908, p. 411.

THE DEVON COUNTY COUNCIL AND THE MEDICAL INSPECTION OF SCHOOL CHILDREN.—At a meeting of the Devon county council held on Sept. 11th it was decided to adopt the resolution of the education committee and to appoint three medical inspectors of school children at a salary of £250 per annum each, with reasonable travelling and hotel expenses. The successful candidates will be required to devote the whole of their time to the duties and to work under the supervision of the county medical officer of health. An amendment was moved to the effect that the education committee should ascertain whether the medical officers of health in the county would undertake the work, but this was defeated by a large number of votes.