it extended a considerable distance below the edge of the ribs, and that it had given rise to the mistaken feeling of a "movable kidney." The patient recovered and went home, and I heard from him that an operation was performed in America for "floating kidney" in January, 1892. He died in September last, and the post-mortem record gives the following amongst many changes: pyothorax and pulmonary tubercle, caries of five dorsal vertebrae (eighth to twelfth), with complete destruction of one; the right kidney was practically normal, save for some small tuberculous spots and its artificial anchorage; and there were prostatic abscess, nutmeg liver, mesenteric tubercle &c. We so rarely get a complete history of cases of this kind that I feel that the above record is a most valuable one, casting a light on many failures I have met with in this operation. There can be no doubt now that my general view of the condition of the patient was a correct one, though I missed, as everyone else did, the fact that the symptoms localised over the right kidney were due to the early stage of dorsal caries and the formation of an abscess which ultimately burst into the right pleura. Certain it is that I was quite justified in refusing to perform nephrorrhaphy in 1890, and its performance in 1892 has been proved to be quite useless. The greater interest attaches to the case in that the patient was himself an experienced physician.—I am, Sirs, yours faithfully,

LAWSON TAIT, F.R.C.S.E. &c.

The Crescent, Birmingham, Nov. 12th, 1893.

"THE SO-CALLED 'PARASITIC PROTOZOA' OF MAMMARY CARCINOMA."

To the Editors of THE LANCET.

SIRS,—I shall be glad if you will allow me to bring forward two or three points which occur to me on reading Dr. Snow's paper on the above subject in your issue of Nov. 11th. As regards the rarity of cancer in comparatively young persons, I do not think it is quite so extreme as stated by Dr. Snow. I am acquainted with a case of mammary cancer in an unmarried woman aged thirty-three, who is in comfortable circumstances, and in whose family history most careful inquiry has failed to elicit any evidence of hereditary taint. "A spontaneous cure is unknown," but not inconceivable, if we consider that portions of cancers are sometimes so fibrous that the cells are quite unrecognisable as "cancer cells," and also that such portions are sometimes as completely calcified as an old tuberculous nodule. This cicatricial process, which is known to occur in certain parts of cancerous tumours, may not improbably in some cases occur throughout the whole of a tumour and so destroy its malignant properties. Dr. Fagge¹ mentions a case of fibrous thickening of the pylorus, which would not have been recognised as cancer except for the presence of secondary nodules in the liver. Dr. Payne² has seen specimens of "fibrous induration of the pylorus, in which no cells could be discovered in the part examined. The probability is that such a mass is the scar of a cancer." Of late years evidences of healed tubercle have been found in the bodies of persons who have died from other diseases with a frequency which would formerly have been looked upon as impossible. A careful search for evidences of healed cancer in the post-mortem room might result in a like revolution in traditional opinion. There are many pathologists better qualified than I am to point out how the coccidia-like bodies of cancer can be distinguished from nuclear and protoplasmic degenerations. I may say, however, that the parasite-like bodies can certainly be seen and differentiated from other structures without over-staining preparations; they can, indeed, be seen in unstained preparations. Among Dr. Snow's figures there is not one which would be accepted as an illustration of a typical parasitic body by anyone who has devoted special attention to these structures. Why do the epithelial cells proliferate and invade parts of the body in which they normally do not occur? Neither in Dr. Snow's "Cancers and the Cancer Process" nor in any of the standard works which I have seen is this question satisfactorily answered. This being the case, an inquiry into the etiology of cancer and the possible connexion of micro-parasites therewith undoubtedly lies within Dr. Snow's "domains of cancer pathology in which valid work remains to be done."

I am, Sirs, yours truly,

Nottingham, Nov. 14th, 1893.

CHAS. H. CATTLE.

"WHERE THERE'S A WILL THERE'S A WAY."

To the Editors of THE LANCET.

SIRS,—Another great man has fallen. He has gone down without taking time to "adjust his mantle ere he fell." The career of Sir Andrew Clark fully verifies the saying, "Where there's a will there's a way." Sir Andrew Clark's will was strong and he made a way for himself under circumstances which would have militated against advancement in most instances. He began life, as he said himself, without knowing he had parents. Of course, that meant too clearly that in early life favourable prospects were distant, probably not far outside the range of impossibility. Notwithstanding the infelicitous condition of Sir Andrew Clark's early life, his will and his talents placed him in the foremost position in the medical world before his too early death took place. All Scotsmen are proud of Sir Andrew Clark, whether they belong to the medical profession or not.

At this particular time it may not be inopportune to recall the early and latter history of another medical man from Scotland who also attained high position, and who began life under circumstances as humble as could well be imagined. Sir William Burnett, who was born in Montrose towards the end of the last century, began his professional life as surgery boy to Dr. Hunter, a practitioner in that town. Part of Willie Burnett's duty was to take charge of his master's horse. After occupying this position for a certain period he proceeded to Edinburgh and attended medical classes. As the time arrived when he might have obtained a diploma he was not fortunate enough to possess the stipulated number of certificates of attendance; his scanty funds were exhausted, and he had not even means sufficient to carry him back to his native town. But, as said before, "Where there's a will there's a way." William Burnett enlisted as a common seaman and went on board a transport lying in Leith Roads. During the tedious voyage to the Nore he made himself known to the surgeon of the ship and with diffidence told him that he knew something of medicine—in fact, gave him his history, and said he might be of some service to him. The surgeon did find him exceedingly useful, and when he gave place to another on arrival at the Nore, he told his successor that he would find that Burnett could be of great use to him and advised him to take advantage of his medical abilities as he had done. After some time a commission as surgeon's mate was obtained by the young man. This was a commission in existence at that time for which a medical diploma was not necessary. After becoming possessed of the needful means young Burnett obtained leave of absence, attended classes, and obtained his diploma. After the struggles narrated, and, no doubt, many more in after-life, although of a different nature, Willie Burnett, as he was familiarly called, became Sir William Burnett, Director-General of the Navy Medical Department.

I am, Sirs, yours faithfully,

D. J.

"PROPOSED NEW MIDWIFERY PRACTITIONERS."

To the Editors of THE LANCET.

SIRS,—With reference to Dr. Rentoul's letter, which you published in your issue of the 11th inst., respecting the advertisement of Queen Charlotte's Hospital, I am instructed to inform you that on Oct. 9th the Committee of Management gave directions that the wording of the advertisement in question should be altered.—I am, Sirs, yours faithfully,

G. OWEN RYAN, Secretary.

Marylebone-road, N.W., Nov. 15th, 1893.

QUACKS.

To the Editors of THE LANCET.

SIRS,—If medical men can only sink for a short time their bickerings and jealousy and pull together for once, they have now a unique opportunity of putting a speedy end to the vile tribe of advertising quacks. The recent disclosures have caught the attention of the public and have roused public feeling. The principal daily papers call for a change in the law. Let us strike the iron while it is hot and approach the Government (which includes an eminent physician) and endeavour to induce it to pass a short Bill amending the Medical Act and forbidding

¹ Principles and Practice of Medicine, second edition, vol. ii., p. 357.

² Manual of General Pathology, p. 319.