skinning a dead sheep. She died within twelve hours from the period of incubation in the middle of summer. The third patient was a man, aged fifty years, a herdsman, who had received inoculation on the neck under the lobe of the ear through handling a dead bullock—turning the carcass over in order to examine the brand. The matter at first was treated with contempt by the patient, but it proved fatal within fourteen hours from the time of inoculation during the excessive heat of summer. These were the only three cases which proved fatal; all the others made a successful recovery under tonic treatment, a liberal diet, black wash application, and free scarification of the sore. In the three deaths which occurred, from inoculation on the face and neck especially, the swelling and discolouration were something enormous, so much so that after death it was impossible to recognise the features, which more resembled a large block of charcoal than those of a human being. It is just as well that the history of these cases should appear side by side in your valuable journal with those which came under the observation of Mr. Robinson at St. Thomas's Hospital, if for no other reason than as a warning that the earlier the treatment the greater the probability of a satisfactory and successful recovery in such serious and most malignant cases.

I am, Sirs, yours faithfully,
ANDREW ROSS, M.D., M.P.

Molong, New South Wales, March 1st, 1898.

"COLLAPSE FOLLOWING LAPAROTOMY."

To the Editors of THE LANCET.

SIRS,—Would you kindly permit me to correct a misprint in my letter published in THE LANCET on April 23rd? I wrote that I injected "3 ii. brandy" into the vein, not "3 oz." as printed.

I am, Sirs, yours faithfully,
CHARLES BOLTON, B.Sc., M.D. B.S. Lond.,
Senior Resident Medical Officer.

Evelina Hospital for Sick Children, Southwark
Bridge-road, S.E., April 23rd, 1898.

* * We regret the error.—ED. L.

AN OBSERVATION REGARDING REVACCINATION.

To the Editors of THE LANCET.

SIRS,—Having read with interest the annotation entitled "The Need for Revaccination" in your last issue I should like to publish the following observation regarding revaccination. During the epidemic of small-pox at Gloucester, being called upon to revaccinate 60 young women the inmates of an "Anglican Home" at Malvern, I revaccinated 30 on the scars left by previous vaccination and the remainder on the normal skin, and found that the cases revaccinated on the old scars took more perfectly than those done on the normal skin. I also observed that in some of the latter cases, in addition to the reaction arising at the seat of the new abrasions, there was in several cases a sympathetic inflammatory action in one or more of the old scars. Calf lymph was used and there was not a failure in the 60 cases.

I am, Sirs, yours faithfully,
J. HOGGAN EWART, M.D. Edin.

Folkestone, April 25th, 1898.

"WHY CORONERS' INQUESTS ARE HELD."

To the Editors of THE LANCET.

SIRS,—Your annotation on "Why Coroners' Inquests are Held" leads me to call attention to the fact that the Registrar-General in his suggestions as to the filling up of certificates of the finding of the jury which are sent to the Registrar lays down the following principle: "The purposes to which inquests are intended to be subservient are partly legal, partly scientific and medical, and verdicts should therefore be such as to answer these several requirements." The question which arises is whether gentlemen who are Her Majesty's coroners are justified in neglecting the instructions of one of Her Majesty's departments of State. It appears to me that they are not.

I am, Sirs, yours faithfully,
LOVELL DRAGE.

Hatfield, April 23rd, 1898.

"AN UNKNOWN LARVAL PARASITE."

To the Editors of THE LANCET.

SIRS,—The following extract from the Medical Appendix by Dr. K. Ker Cross in Sir Harry Johnston's book on British Central Africa may interest your recent correspondents:—"Ifwinjire, not mentioned in any book; it is from the word *injira*, to enter. It is due to maggots in the tissues; native children suffer greatly; I have seen the whole side of a child riddled with holes. These maggots are common in dogs and antelopes."

I am, Sirs, yours faithfully,
F. HYDE MABERLY, M.D. Dub.

Bardley-crescent, Earl's-court, S.W., April 24th, 1898.

THE ROYAL MASONIC BENEVOLENT INSTITUTION.

To the Editors of THE LANCET.

SIRS,—On looking through the list of candidates of the Royal Masonic Benevolent Institution for Widows of Freemasons I find that there are four belonging to our profession. I would throw out a suggestion to your readers who are Freemasons that in the future all medical votes should be given to candidates who are connected with the profession, thus ensuring their election and saving the wasting of votes by giving them away indiscriminately.

I am, Sirs, yours faithfully,
T. CAWLEY EAGER.

Woking, April 23rd, 1898.

"NEW DRUGS AND PREPARATIONS."

To the Editors of THE LANCET.

SIRS—May I be allowed to supplement Dr. Hooper's letter in THE LANCET of April 16th? While recognising that a chemist has no right to dictate to medical men what preparations they should use he must necessarily take a deep interest in making the knowledge of drugs as scientific and exact as possible and must therefore look with regret on the growing tendency to prescribe preparations of a more or less secret character. But if it really is necessary for the benefit of the public that such remedies should be prescribed it is surely not too much to ask that the maker's name and address should invariably be given. For example, Jones's liq. ergotæ or Robinson's syrupus sennæ may be well known in some provincial town, but it does not follow that their fame has reached the metropolis; or, again, elixir cascariæ "A. & H." may be clearly understood by every London chemist to refer to Allen and Hanburys' preparation, but it is quite probable that many a chemist in, say, Dublin or Glasgow might be considerably puzzled by such a prescription. As a matter of fact I have frequently, after sending for some such article to every likely wholesale house and well-known firm, found it necessary to write the prescriber for information as to maker's name and address; meanwhile, the patient has been kept waiting quite unnecessarily for two or three days and unjustly blames the unfortunate chemist, who is not only out of pocket by the transaction, but is blamed undeservedly for not keeping a better stock of drugs.

I am, Sirs, yours faithfully,
T. H. POWELL.

Denmark-hill, S.E., April 19th, 1898.

THE USE OF GLYCERINATED CALF LYMPH.

To the Editors of THE LANCET.

SIRS,—I thought that a quarter of a century ago the controlling power of a concurrent vaccination had been established beyond cavil. A late experience confirmed my acceptance of that teaching. I had to attend a little girl suffering from confluent small-pox and learned from her mother that both this and her other child, aged ten months, had been vaccinated unsuccessfully in early infancy—twice and once respectively. The family attendant had not insisted on more, for the mother had previously had small-pox and he too readily concluded that the children had inherited immunity. I vaccinated the infant, expressing my fear that it might already have caught the infection. This vaccination proved successful and the vesicles ran a perfectly normal course, though accompanied by a copious and exactly

synchronous eruption presenting all the characters of modified small-pox. The elder child died, but the infant recovered without a bad symptom. Mr. Collinson's letter in THE LANCET of April 9th impressed me deeply and painfully, but on reflection his cases seem to me to bear another interpretation and one of serious importance at the present juncture.

When the Stockwell Fever Hospital was first opened during the epidemic of 1870-71 for the reception of small-pox patients I acted as assistant medical officer for six months. Many hundreds were admitted during that period, but the only cases that showed evidence of recent vaccination were a series of four or five which all presented excellent cicatrices and had all been vaccinated by the same practitioner with lymph taken from revaccinations. They were the subject of a short paper in THE LANCET by the medical superintendent, the late Dr. J. B. Barbour, who took occasion to point out the worthlessness of this lymph, though the visible results of its inoculation counterfeited the genuine article. Mr. Collinson's cases seem on a par with the above and read in this light would constitute a grave indictment of the glycerinated calf lymph. A careful perusal of his startling list convinces me that all these vaccinations and revaccinations were impotent though "successful," and, indeed, his last quoted case, which he regards as anomalous, may, I think, be taken as the key to the series.

I am, Sirs, yours faithfully,

April 20th, 1898.

WILLIAM MCLAURIN.

THE ROYAL COLLEGE OF SURGEONS IN IRELAND AND THE REFORM OF THE ARMY MEDICAL SERVICE.

To the Editors of THE LANCET.

SIRS,—I am directed to inform you that the enclosed letter has been sent by the President of the Royal College of Surgeons in Ireland to the Secretary of State for War.

I am, Sirs, yours faithfully,

ROBERT H. WOODS, F.R.C.S. Irel.,

Secretary of Council, Royal College of Surgeons in Ireland.
Dublin, April 26th, 1898.

[ENCLOSURE.]

Royal College of Surgeons in Ireland, Dublin, April 19th, 1898.

MY LORD MARQUIS,—In reference to the Army Medical Department and the reforms in it which are about to be carried out a rumour is current that it is intended to give no higher rank and title than that of colonel. I am unable, of course, to say what justification there may be for such a report, but as President of the Royal College of Surgeons in Ireland it is my duty to state that such a decision would create much disappointment. My College has loyally acceded to your lordship's request that I should nominate two civil surgeons to do duty in the present emergency. It was led to this by the sympathy which your lordship has expressed and by your manifest desire to remove the causes of discontent. But I am bound to say that I fear the dead-lock will continue if the ordinary accepted titles are not conferred upon the higher ranks of the service. It is almost unnecessary to repeat that the medical officers have never thought of commanding in the field, and that any suggestion of that sort is quite groundless. I beg your lordship to believe that in thus addressing you I only wish to help in speedily removing the difficulties which exist and which prevent the filling of vacancies in the Army Medical Department.

I have the honour to be, your Lordship's obedient servant.

W. THOMSON, President R.C.S. Irel.

To the Right Hon. the Marquis of Lansdowne, K.G.,
Secretary of State for War.

THE QUEEN REGENT OF SPAIN.

To the Editors of THE LANCET.

SIRS,—In the full and excellent account of the Ninth International Congress of Hygiene and Demography, published in THE LANCET of April 23rd, the paragraph relating to the reception of the members of the Congress at the Royal Palace at Madrid is of special interest just now. May I venture, therefore, to supplement your correspondent's notes by stating that the Queen Regent, whose wonderful courage and powers of head and heart are exciting the admiration of everyone, spoke most sympathetically and kindly of our sick and wounded soldiers and of the interest she took in the Queen's visit to them at Netley? Her Majesty also spoke of the work done by the nursing sisters in connexion with the plague in India and of the distress she felt in reading of the casualties amongst them. Indeed, it would be impossible to convey in words the infinite sympathy and tenderness with which she referred to our troubles in India and to everything connected with our sick and wounded invalids.

I am, Sirs, yours faithfully,

W. G. MACPHERSON,
Surgeon-Major, A.M.S.

April 25th, 1898.

THE DIPLOMA OF THE APOTHECARIES' SOCIETY.

To the Editors of THE LANCET.

SIRS,—With your permission I should like to make a few remarks respecting the late prosecution of a L.S.A. Lond. by the General Medical Council for describing himself as a physician and surgeon. I presume that the proceedings were taken under Sec. 40 of the Medical Act, 1858, for *wilfully and falsely pretending to be recognised by law as a physician and surgeon*. In 1888 the following letter was published in the leading medical journals:—

Society of Apothecaries, London,
Blackfriars, E.C., Sept. 27th, 1888.

MY DEAR SIR,—The title of Surgeon has long been in use, implying medical practitioner, but the L.S.A. is a licentiate in surgery as well as in medicine. It cannot be said that he is not a surgeon. It seems to me he may call himself what he likes—physician if he pleases.

Yours faithfully,

F. P. Moles, Esq.

T. PILGRIM, M.D., Secretary.

After such a statement, publicly made and never challenged, I cannot see that a L.S.A. who describes himself as a physician and surgeon can be said to *wilfully and falsely* misdescribe himself. I have in perfect good faith described myself as a surgeon for several years and I contend that we are recognised by law as such. Sec. 2 of the Medical Practitioners Act, 1876, says: "All legally qualified medical practitioners, with qualifications in medicine and surgery registered under 'the Medical Act,' shall be capable of being elected surgeons to county infirmaries or hospitals in Ireland."

The regulations for the admission of surgeons to the Army say with respect to the candidate: "He must possess two diplomas or licences, recognised by the General Medical Council—one to practise Medicine, and the other Surgery, and must be registered under the Medical Act in force in the United Kingdom at the time of his appointment. A candidate, however, who holds a single diploma from the Society of Apothecaries, obtained under the conditions of the Act of 1836, will be deemed to possess the double qualification required."

If these instances are not recognitions by law as surgeons, I should much like to know what constitutes legal recognition. It would be interesting to learn why the General Medical Council selected a practitioner in an obscure village for prosecution before a bench of magistrates none of whom have probably any special legal knowledge. If the Council in its newly awakened zeal is so anxious to prosecute the men who supply it with its funds, why does it not ride a tilt with some well-known and experienced practitioner? Dr. Major Greenwood, honorary secretary of the Brussels Medical Graduates' Association, barrister-at-law, has thrown down the gauntlet.¹ It must be confessed that the effect of these prosecutions on the public is anything but reassuring, leading them to believe that the L.S.A. is a sort of bogus diploma and its holder a false pretender and a cheat, who is to be hunted down by the General Medical Council, dragged into a police-court and fined, when he attempts to convey to the public a knowledge of the fact that he is a practitioner in medicine and surgery. Meanwhile any ignorant quack without a vestige of medical education may practise with impunity and the Council folds its hands and averts its eyes.

I am, Sirs, yours faithfully,

April 18th, 1898.

L.S.A. LOND., 1889.

NOTES FROM INDIA.

(FROM OUR SPECIAL CORRESPONDENT.)

Marked Decline of Mortality from Plague in Bombay.—Dissolution of the Plague Committee.—The Discoverer of Plague in Bombay.—Incidents in Plague Work.

THE past fortnight has seen a remarkably rapid decline in the death-rate for Bombay. Whereas it had reached 135 per 1000 it is now 95 per 1000. This decline is coincident with, but not necessarily dependent upon, the change of policy with regard to plague measures. There is now an almost entire absence of repressive measures, so that for all practical purposes the epidemic is taking its own course. This course, however, is an apparently natural one and does not appear to have been determined or even modified by

¹ Vide Brit. Med. Jour., April 9th, 1898, p. 990.