a small knob or in a point, and their terminal portion bears small bud-like projections on the surface. It is this fact of their termination (discovered by Ramon y Cajal) which is relied on as evidence of the discontinuity of the neurons."

Now, whilst it is perfectly true that in silver impregnated tissue the appearance is such as he describes, surely this is no warrant for definitely concluding that because this particular method fails to show anything in structural relationship to the apparently terminal knobs therefore nothing exists. The neuron doctrine must be in a parlous state if it has to rely upon appearances revealed by one method which are refuted by other and more delicate methods.

Methylene blue when appropriately applied forms the basis of one of these newer methods which reveals structures infinitely more delicate than those shown by the silver impregnation used by Ramon y Cajal. It gives a picture which throws grave doubts on the accuracy of much that is shown by silver. Amongst other new details which it reveals it clearly shows that the little lateral projections appearing as terminal by the silver impregnation method are in reality long beaded fibrils, the course of which can often be traced in the matrix for very considerable distances. Dr. Alexander Hill long ago pointed this out even in silver preparations which do occasionally show it.

Finally, Sir William Gowers is not quite accurate when he states that "before staining agents can reveal structure hardening agents have to increase the consistence of the substance and multiply many times any original difference that exists." This does not quite apply either to Ehrlich's "vital" method or that which I have described as the "pseudo-vital" method. In both of these the stain is applied to the tissue prior to any hardening agent and in both cases with very little question success depends upon chemical interchanges between the tissue and the stain, which the addition of a hardening agent would render impossible.

I am, Sirs, yours faithfully,

JOHN TURNER.

Essex County Asylum, Brentwood, July 14th, 1906.

THE WORKMEN'S COMPENSATION BILL.

To the Editors of THE LANCET.

SIRS,—On comparing the above Bill as recently amended in Committee with the extracts from the printed Bill of paragraphs affecting the medical profession which appeared in THE LANCET of April 21st last I find that the only alteration made is in Paragraph 15 of the first schedule. By the first alteration the workman is placed on an equality with the employer as to being able to obtain the certificate of his own medical attendant and use it, and I believe this will be considered as only just. In the second alteration the medical referee may in his discretion, in certain circumstances, decline to give a certificate. I think in this case he should be required shortly to state the grounds for his refusal for the information of all parties interested. I have put the additions to the clause in italics.

First Schedule (15).—A workman shall not be required to submit himself for examination by a medical practitioner under paragraph (4) or paragraph (14) of this schedule otherwise than in accordance with regulations made by the Secretary of State, or at more frequent intervals than may be prescribed by these regulations. Where a workman has so submitted himself for examination by a medical practitioner, or has been examined by a medical practitioner selected by himself, and the employer or the workman, as the case may be, has within six days after such examination furnished the other with a copy of the report of that practitioner as to the workman's condition, then in the event of no agreement being come to between the employer and the workman as to the workman's condition or fitness for employment, the registrar of a county court on application being made by either party—(a) may, on payment by the applicant of such fee not exceeding £2 as may be prescribed if the application is made before the amount of the weekly payment is settled; and (b) shall without any fee if the application is made for the purposes of review after the weekly payment is settled, refer the matter to a medical referee. The medical referee to whom the matter is so referred shall, in accordance with regulations made by the Secretary of State, give a certificate as to the condition of the workman and his fitness for employment, specifying, where necessary, the kind of employment for which he is fit, and that certificate shall be conclusive evidence as to the matters so certified. Where no agreement can be come to between the employer and the workman as to whether or to what extent the incapacity of the workman is due to the accident, the provisions of this paragraph shall apply, in both parties so agree in writing, as if the question were a question as to the condition of the workman, provided that the medical referee, if he considers that the evidence before him is not sufficient to enable him to give a conclusive decision, may decline to give a certificate.

I am, Sirs, yours faithfully,

ALBERT BENTHALL, F.R.C.P. Edin., &c.

Fellows-road, N.W., July 10th, 1906.

A NEW METHOD OF STAINING ENCAPSULATED MICRO-ORGANISMS.

To the Editors of THE LANCET.

SIRS,—Many methods of staining to show simultaneously the organism and its capsule have been recommended from time to time but none of them have been at all certain in their results. In these circumstances it might be worth while to record that with the following method we have been able to get satisfactory and certain results here. The specimen is first stained from three-quarters of a minute to one minute in the ordinary carbol-fuchsin solution and then afterwards for one minute in the following solution as a differential stain: mercuric chloride, 0.1 gramme; and water and alcohol, of each 25 cubic centimetres. The micro-organisms are stained bright red and are clearly seen; the capsule remains colourless against the general pink ground. This stain is permanent and I think can safely be recommended for demonstrating encapsulated organisms. In staining sputa the specimen should be kept for one and a half minutes in the carbol-fuchsin and for two minutes in the special solution.—I am, Sirs, yours faithfully,

Dr. HANS SCHÄDEL.

Pathological Laboratory, "Dreadnought" Hospital,
Greenwich, S.E., July 14th, 1906.

HYGIENIC MEASURES AGAINST SYPHILIS.

To the Editors of THE LANCET.

SIRS,—Dr. C. R. Niven asks "What is morality?" He may remember a definition in Professor T. Clifford Allbutt's "System of Medicine" that "The essential of vice is the instant indulgence of desire at the cost of future disadvantage." I know no clearer statement than this of the real meaning of immorality which can thus hardly be said to be "a matter of instinct rather than of ratiocination." And certainly it is by no means rare to find in England that vice is avoided simply because it is not worth the risk of venereal disease. Not a high motive truly, but sufficient to prove that desire is not so ungovernable as Dr. Niven would seem to believe. By removing the hedge of the risk of syphilis from the margins of "the narrow way" we simply should eliminate an important restraint, especially for that increasing class whose actions are becoming more and more influenced by reason than by instinct. But has Dr. Niven any figures to bring forward to prove that "regulation of vice" does limit the ravages of venereal disease? No. The real fight against syphilis should be part of the campaign against luxury, which, for example, prevents the well-educated, decently born, industrious, and temperate medical man from marrying and having a family till he is 30-35 years of age.—I am, Sirs, yours faithfully,

Manchester Fever Hospital, July 7th, 1906. ERIC M. WILKINS.

THE TREATMENT OF RINGWORM.

To the Editors of THE LANCET.

SIRS,—I was very much interested in Mr. T. Jackson's letter on the treatment of ringworm in THE LANCET of June 30th and I am glad to see that there are still some who appreciate the value of less expensive treatment than that of manifold exposures to the x rays for that troublesome disease. For a short time I used liquor epispasticus in much the same way as Mr. Jackson suggests, but instead of diluting it with glycerine I used the full strength. On the whole the results were satisfactory and I was pleased with my success, until I was called in to see a man whom I had treated in this way. He was suffering from acute headache and sickness, his face was puffy, and his urine was thick with albumin. Luckily the nephritis was transient and disappeared after hot packs and purgatives had been exhibited. Since that time I have had many opportunities of carrying out the line of treatment as suggested by Mr. J. Stafford Mellish in the Hospital of June 30th—namely, the rubbing in of formic aldehyde (40 per cent.). The cures are quicker and more certain than with liquor epispasticus and there is no danger of setting up acute nephritis. The worst case of ringworm which I have ever seen, covering the whole head, was treated by Mr. Mellish a short time back with one rubbing in of formic aldehyde and then the application of ung. hydrarg. oxid. flav. dil. In a fortnight the disease was