each side, of large size, and abundantly supplied with openings. The walls are of Parian cement, and are decorated. The floors are of polished oak. It is hoped, therefore, that the floors and walls are impervious. A very excellent device has been adopted by the architect to secure the purity of the air of the wards. It will be seen that the angles of the wards are canted out, so as to form picturesque towers on the outside. In these the waterclosets, urinals, basins, baths, &c., are placed, without interfering with the large window at the end of the ward. They have a through window draught, and double doors, the passage between which is also swept by the draught of two opposite windows. In the spacious lobbies at the entrance of the wards are the nurses' sitting-rooms (N), which command the wards by a little window, the sculleries, the hydraulic lifts (one to each ward), nurses' waterclosets, &c., and the staircases. There are two day-rooms (D R), and round the parapet of the central court is a terrace, upon which the patients may walk in fine weather. There are also, as we should have said before, a few small wards for cases requiring seclusion. All these varied buildings have been grouped together by Mr. Scott in a most pleasing way. The style is Italian-Gothic, and the material chiefly brick, with coloured courses, stone facings and mouldings, and granite shaftings.

It is difficult to say whether this beautiful and complete hospital reflects most credit upon the art, the science, or the munificence of those who have planned it and carried it out.

THE UNIVERSITY OF LONDON.

THE adjourned annual meeting of Convocation was held on Tuesday evening, at Burlington House. The first business was the consideration of a motion of Mr. Lean, in reference to the promotion of secondary education in school. Convocation decided that steps should be taken to agitate for an improvement in this respect, in general accordance with the recommendations of the report of the Schools Inquiry. Dr. Pye Smith moved that the Senate be requested to consider the expediency of discontinuing the gold medals now given at the M.D. and M.S. examinations; but the subject was postponed. Dr. Taaffe submitted two, in one sense, very important resolutions,—the one to the effect that no person should be admitted to any degree unless he had studied at a college affiliated to the University; the other that middle-class examinations be established in connexion with the University. The first was negatived, we are glad to state, and the second was very properly withdrawn. The Rev. Mr. Creak then proposed that the Senate be requested to take steps for the establishment of courses of lectures or professorships in connexion with the University; but the motion was not carried. It was, lastly, resolved that the annual committee be requested to draw up an address of congratulation to her Majesty the Queen on the escape of his Royal Highness the Duke of Edinburgh from assassination; and that the chairman be requested to sign and forward the same on behalf of Convocation.

Correspondence.

"Audi alteram partem."

INOCULATION OF TUBERCLE.

To the Editor of THE LANCET.

SIR,—Experimental investigations on the artificial production of tubercle in the lower animals are, without doubt, highly interesting and important, but it appears to me that there yet remains a good deal to be done before the connexion between these artificially-induced diseases and those which occur in our own species is demonstrated. Of course it is very probable that this may become clearer as our study and knowledge of the facts advance.

Before we concede the identity of the material generated by inoculation with tubercle as found in the human subject, there comes the question,—What is tubercle? and how far are we justified in considering similarity in form and structure—whether this be microscopical or otherwise—a proof of pathological identity? and this is particularly the case where

morbid products composed of elementary cell-forms are concerned. Again, cannot tubercle be similarly produced in other animals more nearly allied to man, such as the anthropomorphous apes, these animals being very subject to tuberculous affections under the artificial conditions to which they are exposed in confinement? And the question naturally arises,—Can we successfully inoculate with the cell-products of other diseases? Because, if so, these inoculations become part of a law of still wider application,—a law by which new and germinating growths can survive, thrive, and increase, when removed from one animal and placed in contact with the living tissues of another. The attempts which have been made in this direction have hitherto been few, and chiefly with cancerous products.

Most pathologists, and practical physicians likewise, recognise that there exists considerable variety in the tuberculous diseases of internal organs, and that the morbid processes by which these are induced are by no means identical. The condition of the lungs presents wide differences in different cases; and the varieties in the etiology and clinical history of the cases are equally marked: at least such is my experience. In some persons the proclivity to the development of tubercle at certain ages is so great that, do what we may, we cannot avert its occurrence; in others the continued exposure to insanitary causes—causes operating on the body from without—may induce a form of phthisis even in persons evincing no such constitutional proclivity. To me it has always appeared that there exists a class of individuals, possessing a certain conformation of body, known as the tuberculous, whose physiological functions of nutrition, growth, development, &c., are impressed with a definite character, and whose pathological tendencies are to develop diseases at different ages after a pattern of their own. To go no farther than the facts of hereditary transmission—and no reader of Mr. Darwin can ignore its peculiar influence—we must perceive that hereditary predisposition to phthisis falls within the sphere of a great natural law. This predisposition to tubercle may have had its starting point in the acquired disease of an ancestor, and it would therefore be most important to determine whether these inoculated animals can transmit the tuberculous tendency to their offspring. The very marked frequency to a certain form of dyspepsia, as the forerunner and attendant on pulmonary phthisis, as pointed out by Mr. Hutchinson, has always appeared to me to be based upon facts which accorded well with my own observations.

How, then, are we to connect all the phenomena observed in the etiology and clinical history of tubercle in man with those obtained by the inoculation of animals?

Is the *clinical* history in the artificially induced tuberculous diseases of animals identical, or at any rate very parallel, to that in our species? and does the tubercle in the former case pursue the same course, and induce the same concomitant changes in the tissues in which it is deposited, as in the natural form of the disease in the latter? The microscopical examination of some sections of human lung has appeared to me to demonstrate the existence of tubercle *within* its cells. Our domesticated animals are liable to this kind of disease; but why are rodents, relatively to other animals, so susceptible to tuberculous diseases of the lungs after the inoculation of different substances beneath the skin? Is there any anatomical or physiological reason—anything in the structure or relations of the lymphatics, bloodvessels, and lungs peculiar to them?

I do not doubt the accuracy of so many good observers, and I think there are several clinical facts which corroborate the view that the relics of an old inflammation may, at subsequent periods in the lifetime of the person in whom they have occurred, be the centre whence morbid elements are derived, and that these may be translated to other and distant organs, or their absorption may induce some septic change analogous to, however distinct from, that of pyæmia. It is quite possible that the connexion between tubercle and the lymphatic system may not be of an anatomical, but of a pathological kind, through some altered condition of the lymphatic fluids. The subject is a very comprehensive one, beset with difficulty, and we are still at the very threshold of the inquiry. The hiatus between these artificially-induced tuberculous diseases in rodents and the same affections in man, seems to me, however, to be too wide at present to justify anything beyond a suspension of the judgment until a far larger array of facts and experiments, and a different order of facts, are at our command.

I am, Sir, your obedient servant,

London, May 28th, 1868.

JEFFERY A. MARSTON.