tients are photographed before, during and after treatment. A diseased area is selected by pressing on the reddened skin with a glass spatula, which renders the comparatively healthy tissues anemic and reveals any yellow lupoid nodules present. The skin is cleansed with oil of sesame, the diseased area marked with an aniline pencil and a piece of moistened lint with a hole corresponding to this area, applied. A spot of light about 3-5 of an inch in diameter is allowed to fall on the skin. After an hour's treatment a dressing of zinc carbonate and lanolin is applied. There is then no redness, swelling or pain, but from six to twelve hours later redness and swelling occur. After twenty-four hours bullæ often form, and some serous weeping, but rarely pustulation, occurs. If the area of disease is large, the periphery is first attacked with a circle of rings overlapping the healthy skin, and these are afterward carried concentrically inward. The tubercle bacilli are destroyed but the healthy skin is unaffected. This daily treatment may have to be continued for months. The results can not yet be stated.

NOMENCLATURE OF TRANSVERSE PRESENTATIONS AND VERSION.

At the Edinburgh Obstetrical Society, Dr. Berry Hart read a paper on "The Nomenclature of Transverse Presentations and of Version: Choice of the Leg Seized." He said that the best nomenclature in transverse presentations was that which divided them into dorso-anterior and dorso-posterior, and each of these into left acromio-iliac and right acromio-iliac, according as the acromion was directed to the left or the right in the mother. The positions were named after the acromions because this was often the presenting part. The nomenclature of version is very confusing. The terms used are descriptive either of the method or the aim. "Bipolar" and "External" are applied to the former; "Podalic" and "Cephalic" to the latter. There are three great varieties of version: 1, combined external version—cephalic—now seldom used, practically performed by external manipulation, its aim being to get the head to present; 2, Simpson's combined version (podalic) carried out by means of one hand over the abdomen and the other passed deeply into the uterus, the aim being to get the lower limb to present; 3, Braxton Hicks' bipolar version (podalic), performed with one hand external and the other internal, but not deep, that is, not passed beyond the presenting part. In the choice of the leg both the seizure of the further knee and the nearer foot have been advocated. In a simple case either leg might be seized. In difficult cases, with the liquor amnii drained off, it is important to seize the knee which gives the safer operation. Dr. Hart's directions are: "Seize the knee or leg which maintains the dorso-anterior position or converts the dorso-posterior into dorso-anterior—that is, take the further limb in dorso-posterior cases, the nearer in dorso-anterior. When, however, in dorso-anterior cases, the breech is in the fundus, traction on the nearer leg may convert the case into a dorso-posterior one, and when the breech is near the os, in dorso-posterior position, traction on the farther leg may not alter the posterior position of the back after version, owing, again, to want of the necessary obliquity in the pull."

LIVERPOOL SCHOOL OF TROPICAL MEDICINE.

The enterprise of the Liverpool School of Tropical Medicine, which has been founded only a year, is most extraordinary and quite puts to shame older institutions. It had not been founded two months before it sent an expedition under Major Ross to West Africa to investigate malarial fever. Soon a second expedition was sent, and now a third has started for America, with the principal object of investigating yellow fever. The expedition will visit, by invitation, the Army Medical Department at Washington and the Johns-Hopkins University at Baltimore, and confer with the bacteriological experts there. It will then sail to Para, Brazil. Advantage will be taken of the opportunity to test still further the work of the school in malarial fever carried on by Major Ross, and to study dysentery and other tropical diseases from which British sailors suffer so much. That expeditions of this kind have never been undertaken by the government but are left to the private enterprise of a provincial medical school is a startling example of the neglect of science by the authorities,

which is so proverbial in Great Britain. At one of the meetings held in support of the expedition, Major Ross said that the want of intelligence and enterprise, the sluggishness of thought and action as regards tropical sanitation are worthy rather of the Chinese Empire than of any civilized nation. The German government voted £6000 two years ago for a commission to study tropical diseases and yet the greatest tropical power in the world has never voted a penny for this purpose.

Correspondence.

Colored Tents for Hospital Corps.

MOBILE, ALA., June 28, 1900.

To the Editor:—A medical officer of the British Army, operating in South Africa, has recently pointed out the difficulty of distinguishing the red cross as now displayed, at distances even of three or four hundred yard during calm weather, when the Red Cross flag hangs limp from the flagstaff.

Recent reports of opposing forces firing on the Red Cross have been published, and no doubt, in some instances, these attacks might be accounted for by this fact.

Would it not appear advisable to equip the hospital corps with tents of different color from those of the troops in the field, and to uniform the members of the corps in a color so distinctive that they could be recognized at a distance. If the hospital tent were of solid green color, and the hospital corps wore a red jacket, it would be possible to readily distinguish this branch of the service from combatants, at much greater distances than is possible with the present equipment.

T. B. PERRY, M.D.

Department of Ethnology and Archeology, Pan-American Exposition.

BUFFALO, N. Y., July 3, 1900.

To the Editor:—The Pan-American Exposition has seen fit to entrust the care of the Department of Ethnology and Archeology to a practicing physician. I should be very glad if you would allow me to reach your readers with the following request for assistance: Many members of the medical profession are interested in the study of American Ethnology and Archeology, and not a few have valuable collections of Indian relics and skeletons from Indian graves. Those not directly interested in this study are so circumstanced as to be aware of the hobbies of their neighbors and could doubtless furnish the address of collectors. I should be greatly obliged for information and for the loan of collections for the use of this department of the Exposition. Exhibits which represent study in some special line of American Ethnology and Archeology will be particularly suitable. A. L. BENEDICT, Superintendent.

A Model Society.

HARTFORD, CONN., July 18, 1900.

To the Editor:—Medical societies and their progress are always subjects of interest. The Thurber Medical Society is a model and in some ways an object-lesson of great value. The town of Milford, in Worcester County, Mass., had a very noted physician many years ago. He was not only a physician of eminence, but one who made friends, and was literary in his tastes. In 1853 a little group of physicians formed a society for medical improvement and the cultivation of good fellowship, and named it after him. They soon began to collect a library, and received donations from outside, and became incorporated by an act of the legislature. This society has been in existence up to the present time. One hundred and eleven persons are numbered among its members during these years. The average attendance at each meeting is from fifteen to thirty, and this in a country village where many of the members must drive from five to ten and fifteen miles to reach the meeting. During all these years meetings have been held every month for at least eight or nine months during the year, and at each meeting from one to four papers have been read and discussed. Many of these papers have been published; others have been filed away in the library. During