Volunteer Battalion the Border Regiment: Samuel Braithwaite is re-appointed Surgeon-Lieutenant. 1st Volunteer Battalion the Prince of Wales's Volunteers (South Lancashire Regiment): Captain John Nesbitt Patterson resigns his commission, and is appointed Surgeon-Lieutenant. 6th Volunteer Battalion the Gordon Highlanders: Surgeon-Lieutenant J. Taylor to be Surgeon-Captain.

THE INDIAN MEDICAL SERVICE.

The *Pioneer Mail* of Sept. 2nd announces that a telegram received in Simla states officially that the name of the Indian Medical Service is to remain unchanged. There will thus be no Royal Indian Medical Corps, though the members of the service receive military titles in common with their *confrères* in the now extinct Army Medical Staff. It is premature at present to decide whether this decision will prove satisfactory or not to officers of the Indian Medical Service. That service has fine traditions and a deservedly high reputation and its members may on that account be desirous of retaining its name. On the whole it seems to us, however, that it would have been preferable at the present time to have changed its title to that of the Royal Indian Medical Corps.

THE LATE SPANISH-AMERICAN WAR.

The President of the United States has decided that an investigation shall be made by a committee into the conduct of the War Department during the late hostilities with Spain. Some of the main objects in view are to examine into the conduct of the commissary quartermaster and the medical bureau of the War Department and to ascertain the extent, causes, and treatment of the sickness which prevailed in the field and camps during the late war. The estimated total of those who died from disease is given as 2086, while the estimated total of those attacked by disease was excessive. During the war 279 men were, it is alleged, killed and 1423 wounded.

THE TROOPS IN THE KHYBER PASS.

The health of the troops in the Khyber has been already much benefited by the approach of cooler weather and it is still improving. There is a growing belief in official circles that the Khyber will be taken over by the Government of India.

THE LATE FRONTIER WAR IN INDIA.

In consequence of services rendered during the recent frontier operations a number of promotions in the Subordinate Medical Department of India have taken place.

Captain Robert Frazer Standage, I.M.S., who did such excellent work in the engagement with the Soudanese mutineers near Mruli on April 26th, has been brought to the notice of the authorities. He was appointed Surgeon-Lieutenant in 1895.

Lieutenant Thomas Henry Matthews Clarke, R.A.M.C., who, we regret to learn, was wounded in the recent disturbances in Crete, is twenty-five years of age and was appointed Surgeon-Lieutenant in 1897.

Captain G. T. Rawnsley, R.A.M.C., has been appointed an Esquire of the Order of the Hospital of St. John of Jerusalem in England.

CORPORATE AND MEDICAL REFORM ASSOCIATION AT STAMFORD.—A meeting of the profession of Stamford and the neighbourhood, convened by the medical staff, was held at the Rutland, Lincoln and Stamford Infirmary on Sept. 15th to hear an address by Mr. R. B. Anderson. Mr. William Newman took the chair. Mr. Anderson traced the policy of the association to resolutions of the medical members of the Civil Rights Defence Committee affirming the obligation of the General Medical Council and qualifying corporations to make good the rights by conferring and guaranteeing which (respectively) they exist, an obligation which he described as fully sustained in a series of articles in *THE LANCET* in 1896. The chairman contrasted the position and influence of the medical profession in the State with the far greater influence and more advantageous position of the sister profession of the law, and after some questions and discussion resolutions were adopted *nem. con.* supporting the principles and policy of the Corporate and Medical Reform Association and appointing a committee to coöperate in promoting its objects in the locality. With votes of thanks to Mr. Anderson and to the chairman for presiding the meeting terminated.

Correspondence.

"Audi alteram partem."

"THE PLAISTOW MATERNITY CHARITY."

To the Editors of *THE LANCET*.

SIRS,—We are directed by the Executive Council of the East Suburban Medical Protection Society to reply to Mr. Arthur Pritchard's letter in your issue of Sept. 10th. Although not directly challenged by him, and although we are in official correspondence with the committee of the Plaistow Maternity Charity, the council feel that we ought not to leave unrebuked his somewhat ungenerous estimate of our position and motives. If our position had not an element of dignity and our motives of altruism our views would not have found a place in the columns of *THE LANCET*; while, on the other hand, we should be unworthy members of the healing profession if we refused our advice and assistance to the benevolent in their attempt to provide gratuitous nursing for the sick poor.

Unfortunately this Plaistow Maternity Charity has hitherto been administered by amateurs and certain errors have in consequence arisen. We are immediately concerned with the three following departments of the work: 1. The midwives' practice. 2. The district nursing. 3. The training of nurses. Now, Mr. Pritchard in his letter to you treats these *en masse*, whereas it is essential that they should be treated separately; for the one is in direct opposition to qualified practice and the other two depend for their success upon the coöperation of medical men. 1. It is in the midwives' practice alone that fees are taken; it is the midwives' practice that is pauperising the district, for even the well-to-do have a colourable excuse or, according to Mr. Pritchard, a "right" to employ the midwives; and it is in the midwifery cases that the nurses are taught to do without medical supervision. Now, we are at issue with Mr. Pritchard on this point. He claims "the right of the patient to choose between a midwife and a local medical man." We will admit the right of an individual to risk his life for a sufficient reason, but surely it is no part of the duty of a philanthropic body to encourage the poor and ignorant in running such a risk, least of all to save their pride or their pockets. It cannot be denied that it is safer to have a qualified medical man in attendance upon a parturient woman than a certificated midwife. Yet the Plaistow Maternity Charity has deprived the Poor-law medical officers of the greater part of their pauper midwifery practice and actually appeals to the board of guardians for support on the plea that it effects a saving in the rates. Mr. Pritchard also says that because the 10s. fee only covers the cost to the institution of attendance on a maternity case it is a misrepresentation to say that the patient gets any benefit out of the charity. Is it not generally considered a benefit to obtain an article at cost price? Does not the paying patient take one nurse away from her legitimate work among the poor? We have a right to expect more knowledge of economic laws from Mr. Pritchard. It is manifest abuse to buy or to sell, at whatever figure, that which is dedicated by the benevolent to the uses of the poor. Subscriptions to a charity do not entitle a man to use the charity: there is only one ground of claim—poverty. The fee is said to have been "raised from 5s. to 10s. with a view to meeting certain objections advanced by this medical protection society." This is a good example of the way the house committee deals with professional criticism. We objected to fees being charged in maternity cases, thereupon the committee raised the fee. Naturally we considered this a challenge, not a concession. 2. The district nursing is handicapped by the maternity department, for the latter makes the doctors loath to call in Sister Katherine's nurses and accustoms the nurses to disregard the doctors, in spite of rules and regulations to the contrary. As to the "few trifling cases" which Mr. Pritchard says the nurses have attended without a doctor we will only state here that the evidence in our possession shows that in some at any rate of these cases the supervision of a medical man would have been of advantage to the patients. 3. To criticise the system of training prevalent in this institution is beyond the scope of this letter, but those of your

readers who have not seen its annual report for 1897 will be interested to learn that it is described therein as "a nursing school for all England."

The west-end philanthropist, though far too polite to say so, appears to think the east-end doctor neither a man of education nor a man of honour. He does not ask us for help or advice in conducting a most difficult and essentially professional enterprise; he does not deign to employ logical arguments to meet our objections; and, finally, as instance Mr. Pritchard, he is surprised and a little hurt because we are not content to hold our tongues and squeeze what indirect advantage we can from an institution supported by charity. While we are willing to accept the larger share of blame for this as due to our supineness in the past we insist that concession should not be wholly on our side and hope that in the face of recent difficulties and failures the house committee of the Plaistow Maternity Charity will adopt the two initial reforms we are suggesting—viz.: (a) abolition of all fees in maternity cases and (b) adequate representation of the local medical profession upon the committee of management.

We are, Sirs, yours faithfully,

R. BUKSH.

FRAS. E. BROMLEY.

J. HEFFERNAN.

P. NAPIER JONES.

Plaistow, E., Sept. 20th, 1898.

To the Editors of THE LANCET.

SIRS,—In THE LANCET of Sept. 17th you publish a report on the Abuse of Nursing Charities from your Special Commissioner which I cannot allow to pass without a brief comment on some of the facts therein shown. Your Commissioner reports: "Thus a general practitioner related to me that a nurse from the Plaistow Maternity Charity came to him and asked for his assistance in a case of retained placenta. The nurse said that she had been to several other medical men and they had all refused to have anything to do with the case. My informant likewise refused. He argued that medical men should not be thus utilised at the last moment to get a nurse out of a scrape."

No doubt this gentleman would attend a case of chronic drunkenness, where delirium tremens or other complications had supervened, though not called in till the very last moment, but he would not attend a poor woman in imminent danger on the supervention of a complication which could not be foreseen and in what may quite well have been up to that point an ordinary case of labour. Would he have refused to attend the woman if when he had got to the house he had for the first time discovered that a midwife was in attendance? and would it have made a difference to him whether that midwife was trained or untrained? From your Commissioner's report it would appear that he would have assisted the untrained woman's patient but not the trained woman's. And yet the object of the training is, to a great extent, to teach the nurse to know when to send for medical assistance, and, indeed, trained midwives are bound to do so. It is evident that much valuable time was wasted in the case while the nurse, who, after all, could only act as the messenger of the patient, was trying to get qualified attendance for her patient.

May I point out some of the logical consequences of such an abuse of medical position? 1. The nurse will in the future not trouble to call in a qualified practitioner if at all doubtful of his opinions, but if the case be urgent will proceed to operate for herself. The first rebuff, at all events, will appear to her to justify her in thus acting. In a more difficult case she will send for a medical man whom she knows is disposed to help her patients, and this will involve the introduction of fresh medical competition into the district. 2. The nurse will be, to a certain degree, compelled to get more highly trained than she is at present and this will not be too favourable to the pecuniary interests of the trades unionists. 3. Medical men who attend people in such emergencies will be boycotted by their (trades-union) neighbours and they will then be between the coroner's warrant and their neighbours' ill-will. 4. The public will not patronise men whom they know to be bound by rules which disregard everything but the pecuniary necessities of trade. Trades unionists cannot stop from obstructing all measures which interfere with the extension of their trade; logically, they are bound to go on. Unfortunately for the pecuniary interests of the medical profession, its

duty is to stop the spread of that very condition which fills its pockets. If once we sanction such proceedings as those I have quoted—forced, perhaps, to do so under penalties—farewell to our honour as medical men.

In view of the fact that the parish medical officer is bound to attend under such circumstances it is hopeless to try to prevent the patients of midwives from receiving qualified medical assistance when their condition requires it, and if what is evidently a local agreement to this effect were to become at all general, general practitioners would soon be left to enjoy their own society at their own cost. There is a right and a wrong way of filling one's pocket. These gentlemen have started on the wrong path. Let us hope that they will stop and that their example may prove a warning to others. I am, Sirs, yours faithfully,

F. R. HUMPHREYS.

Fellows-road, South Hampstead, N.W., Sept. 19th, 1898.

"TUBERCULOSIS AND THE MILK-SUPPLY."

To the Editors of THE LANCET.

SIRS,—One of the statements made in the lecture on Tuberculosis and the Milk-supply, published in THE LANCET of Sept. 17th, is slightly inaccurate. It was based on information given to me just before the lecture, but a more detailed examination of the cases show that one of the cow-sheds had not been examined, and in two cases instead of one the veterinary surgeon failed to see evidences of disease of the udder. Page 736, second column, line 10 from the bottom, instead of "Dr. Rivers informs me," read "Dr. Niven informs me that after receiving the results of my examinations the Sanitary Committee asked Mr. King to visit the cow-sheds from which milk had come which had been found tuberculous. Mr. King found that in fourteen out of the sixteen byres he examined there were cows with diseased udders," &c.

I am, Sirs, yours faithfully,

Manchester, Sept. 17th, 1898.

SHERIDAN DELÉPINE.

SUNSTROKE OR DELIRIUM TREMENS.

To the Editors of THE LANCET.

SIRS,—That sunstroke should be followed by mental derangement is *a priori* probable, and if there have been any authenticated cases of such a sequence during the heat wave it would be very interesting to have them recorded. Sunstroke has for long been recognised as one of the antecedents of insanity and a large number of cases of the latter malady come under care with a history of the former, but upon strict investigation it is almost constantly found that the symptoms of the "sunstroke," while they do not agree with the classical course of that malady, bear a striking resemblance to those of delirium tremens.

I am, Sirs, yours faithfully,

Catford, S.E., Sept. 16th, 1898.

CHAS. MERCIER.

ANILINE COAL-TAR DYES.

To the Editors of THE LANCET.

SIRS,—The interesting and important case of death from effects of poison introduced into the skin by the use of stockings dyed with some poisonous dye referred to in an annotation in THE LANCET of Sept. 10th should draw professional and public attention to the serious results which often occur to persons who wear coloured hose, &c. Some years ago I drew attention—in the International Health Exhibition in London, 1884—to the evil effects of wearing hose dyed with aniline coal-tar dyes, showing the stuffs so dyed which I had collected from cases in which the patients had consulted me about certain eruptions caused thereby, and I went thoroughly into the matter with the assistance of my friend Dr. Hind, then medical officer of health to Manchester, and we found not only the aniline dyes such as rose aniline, rocceline, and azobenzole red were very injurious to the skin if absorbed, producing violent inflammation and dermatitis, but that the fixing products, such as bichromate of potash, arsenic, &c., also produced the same very irritant effects. The septicæmia caused in the above instance at Hull might have been caused by the dye. I may mention two or three