INOCULATION OF SMALL-POX.

To the Editors of *The Lancet*.

Sirs,—The paragraph headed "Vaccination Extraordinary" in *The Lancet* of Feb. 26th, 1898, p. 619, reminds me that in 1881, I believe, there was in Geneva an epidemic of variola, the regulations relative to compulsory vaccination having been to a great extent disregarded. Each time that I saw a small-pox patient in the dwellings of the poor where parents and children were crowded in one or two rooms I inoculated all the unvaccinated inmates of the apartment, using the pus of the first well-formed variolous pustule. This I did in the belief that every unvaccinated individual would necessarily take the disease, isolation being impossible. My method of inoculations put the case in a way that vaccine lymph, scratching the skin, but not making it bleed much. This was done by me in about forty instances; the inoculations were not attended by any accident and all the inoculated all the unvaccinated inmates of the apartment. That cholera, typhus, and enteric fever are believed to be transmitted by means of specifically polluted drinking water, though we are really afraid that a plea of "verbal error" can only with very considerable elasticity be made applicable to a statement that "cholera, typhus, and enteric fever are believed to be communicated through the dejecta from the patient contaminating drinking water." We regret, however, that on our part words never intended to have been placed in inverted commas but which is not what I have enclosed in inverted commas, but which is not what I have said and has a different meaning (see p. 13 at top). It is really a compliment to be thus misrepresented by an opponent, because it implies such a plentiful lack of fact or argument against the author's real statements or contentions. Besides, it furnishes me with another example, to add to those I have given, of the various abuses of the medical profession when dealing with this question. Equally complimentary is it that immediately after commenting upon your own misquotation you run away from my book to quote some quite unimportant portions of my examination before the Royal Commission eight years ago. I tendered evidence on the statistical side of the subject only, but the Commissioners insisted upon questioning me on medical and other matters as to which I knew little or nothing and of which ignorance—not claiming omniscience—I am not in the least ashamed. Again thanking you for your unintentional, but none the less acceptable, testimony as to the unanswerable character of the facts and arguments in my book, I am, Sirs, yours truly.

West Norwood, March 26th, 1898.

ALFRED R. WALLACE.

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**WE are glad to hear that Mr. Wallace has now been convinced that small-pox is not to be eradicated by means of specifically polluted drinking water, though we are really afraid that a plea of "verbal error" can only with very considerable elasticity be made applicable to a statement that "cholera, typhus, and enteric fever are believed to be communicated through the dejecta from the patient contaminating drinking water." We regret, however, that on our part words never intended to have been placed in inverted commas but which is not what I have enclosed in inverted commas, but which is not what I have said and has a different meaning (see p. 13 at top). It is really a compliment to be thus misrepresented by an opponent, because it implies such a plentiful lack of fact or argument against the author's real statements or contentions. Besides, it furnishes me with another example, to add to those I have given, of the various abuses of the medical profession when dealing with this question. Equally complimentary is it that immediately after commenting upon your own misquotation you run away from my book to quote some quite unimportant portions of my examination before the Royal Commission eight years ago. I tendered evidence on the statistical side of the subject only, but the Commissioners insisted upon questioning me on medical and other matters as to which I knew little or nothing and of which ignorance—not claiming omniscience—I am not in the least ashamed. Again thanking you for your unintentional, but none the less acceptable, testimony as to the unanswerable character of the facts and arguments in my book, I am, Sirs, yours truly.

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MR. A. R. WALLACE AND VACCINATION.

To the Editors of *The Lancet*.

Sirs,—I thank you for the notice of my pamphlet, "Vaccination a Delusion," in your issue of March 12th. I saw a small-pox patient in the dwellings of the poor where parents and children were crowded in one or two rooms and I inoculated all the unvaccinated inmates of the apartment, using the pus of the first well-formed variolous pustule. This I did in the belief that every unvaccinated individual would necessarily take the disease, isolation being impossible. My method of inoculations put the case in a way that vaccine lymph, scratching the skin, but not making it bleed much. This was done by me in about forty instances; the inoculations were not attended by any accident and all the inoculated all the unvaccinated inmates of the apartment. That cholera, typhus, and enteric fever are believed to be transmitted by means of specifically polluted drinking water, though we are really afraid that a plea of "verbal error" can only with very considerable elasticity be made applicable to a statement that "cholera, typhus, and enteric fever are believed to be communicated through the dejecta from the patient contaminating drinking water." We regret, however, that on our part words never intended to have been placed in inverted commas but which is not what I have enclosed in inverted commas, but which is not what I have said and has a different meaning (see p. 13 at top). It is really a compliment to be thus misrepresented by an opponent, because it implies such a plentiful lack of fact or argument against the author's real statements or contentions. Besides, it furnishes me with another example, to add to those I have given, of the various abuses of the medical profession when dealing with this question. Equally complimentary is it that immediately after commenting upon your own misquotation you run away from my book to quote some quite unimportant portions of my examination before the Royal Commission eight years ago. I tendered evidence on the statistical side of the subject only, but the Commissioners insisted upon questioning me on medical and other matters as to which I knew little or nothing and of which ignorance—not claiming omniscience—I am not in the least ashamed. Again thanking you for your unintentional, but none the less acceptable, testimony as to the unanswerable character of the facts and arguments in my book, I am, Sirs, yours truly.

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"ADENOID VEGETATIONS AND LARYNGEAL STRIDOR."

To the Editors of *The Lancet*.

Sirs,—An article from the pen of Dr. Eastace Smith relating to diseases of childhood necessarily commands so much attention that I venture to ask for space for a brief criticism of the views expressed by him in his recent paper on Adenoid Vegetations and Laryngeal Stridor.1 Dr. 

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1 *The Lancet*, March 14th, 1898, p. 733.
G. A Sutherland and I recently claimed to prove that an affection commonly known as congenital laryngeal stridor depended upon a congenital deformity of the superior laryngeal aperture aided by the flaccidity of the parts in infancy, (not on the latter factor alone as Dr. Smith erroneously interprets our views). If adenoids are the exciting cause of the affection, as Dr. Smith asserts, it is a little surprising that Dr. McNab, who examined six cases for Dr. Thomson of Edinburgh, and myself in some twelve consecutive cases have been unable to find them in a single instance. Dr. Smith's contention is weakened and his bias shown by his statement that he always believed these cases were due to adenoids but that until this one case came under observation he had no substantial evidence of it. The typical cases of described by Dr. Thomson, Dr. Sutherland, and myself form a group per se and must be carefully distinguished, as we pointed out, from cases of laryngeal spasm due to adenoids or other form of nasal obstruction.

Many details of Dr. Smith's case, apart from the result of treatment, point to its belonging to the latter class. Thus the stridor ceased under chloroform, was much increased in sleep or by closing the mouth as in feeding, and the patient was subject to severe suffocative attacks, these symptoms being characteristic of the adenoid cases and very rare in the affection we have called congenital laryngeal obstruction. Thus Dr. Smith's case in no way controverts our views as to the pathology of the latter affection. Finally, when Dr. Smith states that he believes the affection to be due to spasmodic contraction of the ary-epiglottic folds, and that this is due to irritation set up by the adenoids in the nasopharynx, I venture with all deference to reply that the spasm in his patient was possibly due to irritation set up by the examiner's finger and laryngeal mirror in the infant's pharynx—a not uncommon reflex.

I am, Sirs, yours faithfully,

HORACE E. HAYNES.

Evesham, March 23rd, 1898.

UNQUALIFIED ASSISTANTS AND THE GENERAL MEDICAL COUNCIL.

To the Editors of THE LANCET.

SIRS,—I am an unqualified medical assistant, have been in the profession forty-five years, and was apprenticed to a firm of surgeons at Nuneaton, Warwickshire, for five years, for which my father paid £500. I then went to Guy's Hospital and completed my hospital curriculum, and went for examination, but unfortunately was rejected. I then was appointed surgeon on a ship, the Wild Duck, sailing from London to New Zealand. I had seven voyages in the capacity of surgeon; at the end of my seven years on board I gave up the appointment and obtained an assistantcy at Great Bridge, Staffordshire. I attended 2500 cases of midwifery in seven years. I then left Great Bridge and since that time have been engaged as assistant in very large practices, where I have attended a very large number of midwifery cases. I can say without exaggeration that I have attended personally 5000 cases of midwifery and never had a woman die under my treatment. I am now sixty-five years of age, in very good health, and able to do any amount of day and night work, not having had an hour's illness in my life. On reading the important notice as to the employment of unqualified persons as assistants or otherwise directed to be issued by resolution adopted by the General Medical Council on Nov. 24th, 1897, where it says the foregoing notices do not apply to the legitimate employment of midwives, dressers, and surgery attendants under the immediate personal supervision of a registered medical practitioner, will you kindly inform me if I can attend cases of midwifery, of course under the supervision of my principals? A very early answer will very greatly oblige.

Yours faithfully,

March 16th, 1898.

J. T. L.

* * * In our opinion our correspondent's attendance on "cases of midwifery" would subject his principal to the risk of being called to account by the Council. Why should our correspondent not submit his question to the General Medical Council?—Ed. L.

HOSPITAL ABUSE.

(By our Special Commissioner.)

XV.—BRADFORD.

Abuse affecting the Hospital Medical Staffs.—Small Payments Imposed on Poor Patients.—A Paying Clinic for Diseases of the Eye.—The Question of the Municipalisation of the Hospitals.—Charity Patients and their Christmas Dinners.—Patients attended at their Homes by Hospital Surgeons.—Admirable Competition against Private Practitioners.

BRADFORD boasts of being the seventh largest town in England. In 1852 its population was estimated at 197,103, the birth-rate being 15-29 and the death-rate 18-83 per 1000. In 1872 the population was 232,267, the birth-rate 32-84, and the death-rate 17-91 per 1000. In 1886 the population was set down at 283,859, the birth-rate at 25-94, and the death-rate at 17-1 per 1000. From these figures it will be seen that the attendance at the hospitals should have fallen with the birth-rate being 13-59 and the death-rate 21-01 per 1000. From these figures it will be seen that the attendance at the hospitals should have fallen with the birth-rate being 13-59 and the death-rate 21-01 per 1000. In 1892 the population was 219,262, the birth-rate 28-64, and the death-rate 16-77 per 1000. From these figures it will be seen that the attendance at the hospitals should have fallen with the birth-rate being 13-59 and the death-rate 21-01 per 1000.

BRADFORD.

To the Editors of THE LANCET.

We, the undersigned, having regard to the "sweating" rates of patient was possibly due to irritation set up by the examiner's finger and laryngeal mirror in the infant's pharynx—a not uncommon reflex.

I am, Sirs, yours faithfully,

HORACE E. HAYNES.

Evesham, March 23rd, 1898.

"GROUND-WATER AND MALARIA."—HOSPITAL ABUSE.

The previous articles on this subject were published in THE LANCET on the following dates: (1) Sept. 26th, 1896, Plymouth and Devonport; (2) Oct. 12th, 1896, Reading; (2 concluded) Oct. 17th, 1896, Rotherham; (3) Oct. 31st, 1896, St. Thomas's Hospital, London; (4) Nov. 4th, 1896, The Royal London Hospital; (5) Nov. 21st, 1896, Liverpool; (6) Dec. 8th, 1896, Liverpool; (7) Dec. 25th, 1896, Liverpool; (8) Jan. 2nd, 1897, Manchester; (9 continued) Jan. 9th, 1897, Manchester; (10) Jan. 12th, 1897, Manchester; (11) Feb. 6th, 1897, Leeds; (12) Feb. 13th, 1897, Leeds; (13) March 5th, 1897, Glasgow; (14 concluded) March 19th, 1897, Glasgow.

"GROUND-WATER AND MALARIA."—HOSPITAL ABUSE.

To the Editors of THE LANCET.

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Yours faithfully,

March 16th, 1898.

J. T. L.