My present impression is that Dr. Hood has fallen into the error of citing the cases of young children as if they were comparable with a set of cases having an essentially different rate of mortality. Dr. Bristowe says, "Young children seldom die of this disease." Dr. Hood will, of course, show the ages and all other material particulars of his cases in the table which I ask him to favour us with. At this moment, I cannot find time to prepare such a table, but I will endeavour to do so for the next issue of THE LANCET. My own conviction is that in enteric fever the use of alcohol rarely does anything but provoke premature exhaustion of the heart muscle, and spoil the digestive powers of the stomach.

I am, Sirs, your obedient servant,
Dover-street, Piccadilly, Nov. 14th, 1893. JAMES EDMUNDS.

To the Editors of THE LANCET.

SIRS,—Dr. Hood's criticism, in THE LANCET of Nov. 11th, of the practice of the medical staff of the Temperance Hospital and the non-alcoholic treatment of typhoid fever will, I trust, have the good effect of showing that there is much to be said on that side of the question to which he so forcibly expresses himself as opposed. As resident for some years in the fever hospitals my views of the value of alcohol in fever underwent, solely as a result of the experience there gained, entire modification. The conviction became forced upon my mind that, in no case in which it was used did benefit to the patient ensue; that in a proportion of cases its use was distinctly hurtful; and that in a small, but appreciable, number of cases the resultant harm was sufficient to tilt the balance as against the recovery of the patient. During a residence of three years in the City Fever Hospital, South Liverpool, I was enabled to reduce the yearly consumption of alcohol to an amount so small that, taken together with the clinical records of the hospital during that period, it fairly entitles me to claim the feasibility of managing a fever hospital without the use of alcohol in any shape or form, either for the staff or for the patients. The diseases dealt with comprised scarlet fever, typhus fever, typhoid fever, and diphtheria. A somewhat precise standard for comparison of results was at hand in the records for the same period of the City Hospital, N., the two institutions being in point of fact identical in all details of management and discipline, with the exception that at the latter alcohol continued to be freely given. This test was excellently well borne by the non-alcoholic method of treatment. The facts and figures upon which this conclusion is based I have at hand and regret that I cannot allude more fully to them here. I may add that I approach the subject free from teetotal or other bias. The rejoinder of the staff of the Temperance Hospital will be awaited with interest.

I am, Sirs, yours faithfully,
Robert-street, N.W., Nov. 22nd, 1893. C. KNOX BOND.

"SIR ANDREW CLARK."

To the Editors of THE LANCET.

SIRS,—In the interesting obituary notice of the late Sir Andrew Clark which was published in THE LANCET of the 11th inst. you quote from an address of his the following words: "I went out to Madeira to die, but I did not die, and on my return I got the appointment and now I am the only one living who was then on the staff of the hospital." If Sir Andrew Clark was correctly reported he made a curious mistake, for I believe that more than one of the London Hospital staff of 1854 outlived him. I can answer for one—my father, Dr. W. J. Little, who was then physician and who is now, I am happy to say, enjoying a green old age in his eighty-fourth year, although he has for some years given up practice.

I am, Sirs, yours faithfully,
Seymour-street, W., Nov. 20th, 1893. E. MUIRHEAD LITTLE.

"THE HYGIENIC AND THERAPEUTIC ASPECTS OF CLIMBING."

To the Editors of THE LANCET.

SIRS,—Under the above title Dr. Hermann Weber contributes an interesting paper to THE LANCET of Oct. 28th last. My name is mentioned in that communication with reference to the influence of climbing on the temperature of the body, and the following remark occurs in Dr. Weber's paper: "He (Dr. Marcet) came to rather different conclusions—

namely, that the bodily temperature becomes invariably diminished by the act of climbing, and more so if this be done upon an empty stomach, or if the climbing is associated with mountain sickness." Dr. Weber's quotation is from a paper I communicated to the *Archives des Sciences Physiques et Naturelles*, Geneva, 1869, in reply to remarks made by a Swiss gentleman, Dr. H. Virnet, and it is quite true that the observations on myself led to that conclusion as far as I was concerned. At the same time I was careful not to generalise on those personal data, and I certainly did not conclude that the bodily temperature becomes invariably diminished in the act of climbing. The last paragraph of my paper runs as follows: "The matter discussed in the present paper will, I hope, assist towards reconciling the two opinions emitted with respect to the influence of muscular exercise in the act of climbing on the temperature of the human body. Some people become warmer and others colder, and, moreover, in the same person the temperature appears liable to rise or fall according to circumstances."

I am, Sirs, yours faithfully,
Nov. 18th, 1893. W. MARCET.

"THE SO-CALLED 'PARASITIC PROTOZOA OF MAMMARY CARCINOMA.'"

To the Editors of THE LANCET.

SIRS,—I will ask the favour of a brief reply to Dr. Cattle's criticisms. 1. I fear that his doubts upon the genuine character of the parasites depicted must be due to my own defective draughtsmanship, for the slide in question was some time since submitted to Dr. Armand Ruffer, who pronounced the most characteristic cell-forms therein to be particularly well-marked examples of the "protozoa." 2. I am pleased to find that Dr. Cattle admits that the "parasites" can be seen in unstained preparations, a statement with which I entirely agree. My argument on this point was directed against the view with which their "discovery" was first enunciated—that special staining methods were requisite to render them visible, or, later in the controversy, to differentiate them. 3. I think that no up-to-date pathologist will recognise the existence of any "fibrous cancer" in which characteristic cells, with their usual mode of arrangement, cannot be readily detected by the microscope; though, as in the historical example of the late German Emperor, a piece of non-cancerous tissue may be erroneously examined. I readily admit that cases of atrophic scirrhus, permitting life for twenty or more years, furnish an approximation to the spontaneous cicatrization of tubercle; but even here death eventually results from visceral metastases, and no complete obliteration of the carcinoma cells ever takes place. The onward course of the malady is sure, if slow. 4. Dr. Cattle's rather exceptional instance of breast carcinoma in a woman aged thirty-three in no way impairs my generalisation that cancer, with the reservation I have previously made, is emphatically a disease of advancing age, practically restricted to degenerating organs and to decaying people. The devolution of the mamma ordinarily begins about thirty-seven years of age; but cases of its premature supervention must needs sometimes occur. In view of Dr. Cattle's former utterances on this parasite question, I can hardly be surprised that he finds my explanation of the *rationale* of cancer proliferation and diffusion "unsatisfactory"; but the theory of autostic cell reversion, upon which the work he does me the honour to mention is based, applies to all kinds of cells liable to malignancy, and I should much like to know why his difficulties seemingly are greater in the case of epithelial than of the various remaining cell species. Finally I would very respectfully ask our learned societies in general, and the Pathological Society in particular, why a sufficiently large and representative committee is not appointed to authoritatively thresh out a question so generally exercising professional attention.

I am, Sirs, yours faithfully,
HERBERT SNOW.
Gloucester-square, Portman-place, W., Nov. 20th, 1893.

"LOCOMOTOR ATAXY TREATED BY PHOSPHATIC INJECTIONS."

To the Editors of THE LANCET.

SIRS,—Having read the interesting case related by Dr. Forbes Winslow,¹ I wish to quote very briefly the following

¹ THE LANCET, Nov. 18th, 1893.

case. A poor married woman called for me on account of several symptoms, including locomotor ataxy. After a trial of the usual remedies by the mouth I began injections of phosphate of soda (ten centigrammes in one gramme of the vehicle), prepared according to Dr. J. Roussel's formula, on Dec. 31st, 1892. I made one injection every alternate day for a month, then stopped for a week, began again on Feb. 6th, 1893, and stopped on the 20th. The patient having relapsed, and presenting anew the symptom of throwing her legs sideways when walking, I gave her the injections again from March 8th till the 22nd. On April 10th she left Geneva for the country considering herself as cured. Since then I have lost sight of her. I must add that five or six times I injected arseniate of strychnine or phosphorus; but the phosphate seems to have been the active remedy. She had altogether thirty-two injections. When I have a sufficient number of cases I will publish them. This is only a short note written in a hurry.

I am, Sirs, yours truly,
Geneva, Nov. 20th, 1893. A. CORDES, M.R.C.P.Lond.

"STRICTURE OF THE ŒSOPHAGUS AND CANCER OF THE LIVER."

To the Editors of THE LANCET.

SIRS, — Having just read in THE LANCET of Nov. 4th Mr. Mayo Collier's letter on the above subject, in the concluding remarks of which he invites other members of the profession who have met with similar cases to record them, I beg to relate a few particulars of one which came under my care a few weeks ago. A delicate youth about fifteen years of age, a clerk in an office, consulted me for failing health and complained that when he took his meals the first portions were always vomited, but when he returned to the table he could swallow the remainder. This led at once to an examination of the abdomen, and I found a large hard tumour occupying the upper part of that region, a large, prominent mass bulging in the left of the epigastrium, a smaller one down in the left hypochondrium, and another less prominent one in the right hypochondrium. In a few days ascites supervened, which was relieved by paracentesis, and on the last day of his life he was jaundiced. I regret to say that in consequence of the rapid decomposition which followed after death I refrained from making a post-mortem examination; but I think that the position and character of the tumour, together with the symptoms and the association of ascites with jaundice, justify the opinion that it was in all probability a case of the description recorded by Mr. Collier. To the best of my recollection, the power of swallowing was completely lost as the disease progressed.

I am, Sirs, yours truly,
Rotherham, Nov. 21st, 1893. WM. OXLEY.

CONSULTATION WITH HOMŒOPATHS.

To the Editors of THE LANCET.

SIRS, — In a certain town a homœopath practises. A well-known London surgeon sees no harm in accepting operation cases from him. An equally well-known provincial physician, who well knows the nature of this man's practice, meets him in consultation. A medical man practising in the same town, and physician to the local hospital, for many years has taken his minor surgery and met him in consultation. Will you kindly express your opinion as to the etiquette of this procedure?

I am, Sirs, yours faithfully,
Nov. 18th, 1893. MEDICUS.

* * The etiquette is quite established in regard to such a question in medical cases. There can be no agreement between a homœopath and an ordinary practitioner. We are not prepared to say that in surgical cases of emergency this rule should be pushed to an extremity, but even here it is obvious that two cannot walk together unless they agree. Both the patient and the surgeon might suffer for want of proper medicine, as every good surgeon would admit. — ED. L.

MR. T. D. HARRIES, F.R.C.S. Eng., M.R.C.P. Lond., J.P., has been elected Mayor of Aberystwyth for the ensuing year.

MANCHESTER.

(FROM OUR OWN CORRESPONDENT.)

End of the Coal Strike.

THERE are perhaps few great industrial centres in England in which rejoicing at the termination of the coal strike has been more hearty and widespread than in Manchester. For many weeks past men, women, and children, evidently unused to begging, have frequented the leading thoroughfares and the tram termini of the city asking for subscriptions on behalf of the starving families of the colliers on strike. There is little doubt that considerable sums of money have been collected by this means, but nevertheless the sufferings of the poor women and children have undoubtedly been severe, and the rejoicings now taking place among the colliery districts in Manchester and its neighbourhood at what is locally called the "end of the coal war" are very real and absolutely universal. In this connexion it may be mentioned that the corporation, as proprietors of all the gasworks in Manchester, have incurred considerable odium because of their recent determination to increase the charge for coke at the several stations; the newspapers have contained strong protests against this decision, but hitherto without avail; and the price of coke is still so high as to afford little relief to the poor, who cannot raise the money necessary to provide sufficient fuel of any kind to protect themselves from the severe weather of the last few days. Hitherto, fortunately, the death-rate in Manchester from diseases produced by cold and privation has not been excessive, and there is now every hope that, the colliers having returned to work, the Christmas season will prove a brighter one for the poor of Manchester than seemed likely even so recently as last week.

The Return of Influenza.

It is disappointing to find from the official returns that influenza is again beginning to figure in the Manchester death-roll, four deaths having been attributed to that disease during the week ended Saturday last, and one death in each of the two preceding weeks. These numbers in themselves are of course not excessive, considering the size of Manchester; but unfortunately there are indications that this unwelcome disease has already made considerable headway in the city and its neighbourhood. In Salford especially there appears to have been a large number of attacks, and I hear of not a few persons in good social position both there and in the city who have been temporarily laid aside by "la grippe." According to general report the disease does not appear to have been present this year in by any means so severe or so fatal a form as in either of the last two years, but if the deaths have been less numerous the disease seems to have been as infectious of late as ever it was, and to have spread as rapidly as in former years from one end of the city to the other. It is said that a considerable number of persons who suffered from influenza either in 1890-91 or in 1891-92 have been among the first to take infection again this year; if this turns out hereafter to be the general experience there will be little future solace in the belief, which is common in certain quarters, that one attack of influenza confers a certain amount of immunity from subsequent attacks of the same complaint. According to the reports from the Swinton schools and other infected places the cases are doing well, and it is hoped that the schools, at any rate, will shortly be freed from the disease.

Our Healthy Homes Societies.

With the approach of winter one is glad to note that our healthy homes organisations are beginning to bestir themselves for another good season's work. This year, too, in place of a single society—that of Ancoats—we have in Manchester as many as three separate associations working on the lines of the parent society, but in other and not less suitable parts of the city. For some unexplained reason, last Thursday night was the opening night for all three of our societies, the consequence being that, as the available voluntary musical and other "talent" had to be distributed at three separate points, the entertainments at each of them were perhaps less effective than they would have been under other circumstances. It is to be hoped that when the period approaches for fixing the date of the next monthly meeting the blunder of holding all three meetings