PROTECTIVE POWER OF VACCINATION.

To the Editors of THE LANCET.

SIRS,—In these days when there is a great tendency to do away with, or, at any rate, to undervalue the marvellous protective power of vaccination over that dread disease, small-pox, I deem it the duty of any person who has proved by facts the efficiency of the vaccine virus not to let the light thrown upon him be hidden under a bushel, but to come forward and state facts which have happened in his experience as to the thorough protective power of vaccination. I may state that some time since I was summoned to see a patient who had recently come from Wales to visit some friends who resided in a small village in the county of Cornwall. Two or three days after his arrival the disease proved to be variola of a confluent type. There were about eight or ten children who ran in and out of the house before the disease partook of its true character. Now, the most remarkable feature of this case was that, although these children had really been exposed to these germs, no child sickened for small-pox, all, except one, having been successfully vaccinated, and this one, an infant two months old, a healthy child, took the disease and died. Surely this is an indisputable fact which will take much more weighty arguments to upset than the anti-vaccinationists have hitherto expressed. I also must speak most highly of the importance of using calf lymph in preference to human, however carefully kept, as I firmly believe the strength of the virus becomes attenuated and perhaps deteriorated by repeated periodical vaccination. During my last public vaccination within this month I have found the calf lymph very successful, having done forty-five cases, and all, with the exception of one case, in which one point failed, resulted in four perfect vesicles.—I am, Sirs, yours obediently,

J. M. BRAUND,

Public Vaccinator for the North District of the
Stratton Union, Cornwall.

May 1st, 1889.

To the Editors of THE LANCET.

SIRS,—In view of the popular interest which is again becoming aroused on the question of vaccination and the fact that another Royal Commission is imminent, the following additional instance of its efficacy is, I think, worthy of record. On Oct. 17th, 1887, a child was admitted into the Northern Fever Hospital in the peeling stage of scarlatina. On the sixth day after admission she showed signs of severe illness, followed on the third day by an eruption of semi-confluent small-pox. She was at once isolated, and on the morrow transferred to the small-pox hospital at Deptford. Steps were at once taken to vaccinate all patients who might, either directly or indirectly, have been exposed to the contagion. They numbered 162. With the exception of an assistant nurse, who was let off on her statement that she had been vaccinated thirteen months previously at the Homerton Hospital and had had a bad arm, all the staff, numbering 110, who were not marked by a previous attack of small-pox, or who were unable to show satisfactory marks of the operation performed within the previous year, were revaccinated. Only one person took small-pox, the assistant nurse referred to. On the night of the twelfth day following the child's removal she was seized with rigors, intense backache, and vomiting. Her temperature rose to 105° the same night, followed by the eruption on the third day. The case ran the usual course, and was typical of modified variola. No other case occurred. Now, without claiming too much for vaccination in this instance, by allowing a wide margin for possible fallacies, such as the varying degree in which different patients and members of the staff were necessarily exposed to the contagion, possible errors in some of their statements as to the date of their last vaccination, the admission of some cause other than sufficient previous protection, to account for those cases in which the revaccination failed to take, the inference to an unbiased mind cannot fail to be striking. The case in point is merely another illustration of the lesson which is constantly being derived from the experience of the various small-pox hospitals. But the constantly accumulating evidence on this subject may unfortunately be expected to make about as much impression on a mind pregnant with Utopian notions of the "liberty of the subject" as the verdict of a dozen Royal Commissions.

I am, Sirs, yours obediently,

FRED. FOORD CAIGER, M.D. Lond., D.P.H. Camb.
Hampstead, April, 1889.

"IS OUR LUNATIC ASYLUM SYSTEM A FAILURE?"

To the Editors of THE LANCET.

SIRS,—I have read with much interest Dr. Tuke's paper in the April number of the *Nineteenth Century*, and your criticism thereon in your issue of the 20th ult.

With the major part of Dr. Tuke's paper few medical men connected with asylums will disagree, but there are one or two points on which I believe a discussion might be of advantage—at any rate to the junior members of asylum staffs, who are at least as equally interested in the study of insanity as in the affairs of administration which meet them at every turn. As I read his paper it appears to me that his chief hopes for the cure of insanity lie in the direction of the more thorough study of the acute cases, and you approve and accentuate this in your criticism. With much deference to Dr. Tuke's long experience, I venture to submit that the study of the more chronic cases is at least equally important, and, indeed, may give far more important results. I assume from several passages in his paper that Dr. Tuke discards the psychological theory of insanity, and looks upon it as an organic disease of the brain. I write under correction, but I believe there must be very few organic diseases in which an enlightened method of treatment has been obtained from the nearly exclusive study of their more acute phases. It seems to me that the whole fabric of the pathology of the diseases of the cord has been built up by working backwards from the morbid appearances at the termination of the disease. How easy is, for instance, the recognition of the morbid anatomy of locomotor ataxy in its advanced stages; how difficult the pathological appearances at its onset. The morbid appearances of acute insanity are practically *nil*. In chronic insanity the changes in the brain and its membranes are so patent and extensive that it is impossible to elude the suggestion that they stand in the relation of cause and effect.

It is impossible within the limits of a letter to mention all the points bearing on this subject. I have only to add that the present apparent hopelessness of the cure of confirmed insanity should be a stimulant and not a bar to its study.

I am, Sirs, yours faithfully,

FREDERICK BRYAN, M.B.

The Asylum, Colney Hatch, N., May 1st, 1889.

SCURVY IN CASUAL WARDS.

To the Editors of THE LANCET.

SIRS,—Although genuine cases of scurvy are not uncommonly met with amongst the London poor, the fact that the frequenters of the metropolitan casual wards occasionally develop the disease is worthy of record. During the past year I have noticed six cases, in all of which there were extensive subcutaneous effusions of blood in the lower limbs, the popliteal space being the seat in four cases, and the region immediately above the ankle in the remaining two. Peri-follicular hæmorrhages scattered over the legs and thighs were present in all the cases, spongy gums were detected in three, and cardiac weakness in one who fainted while taking the customary bath on admission to the infirmary. All the cases speedily recovered, the treatment adopted being the administration of the tincture of the perchloride of iron and a generous diet, including fresh vegetables. They were all males, and belonged to the regular vagrant class who wander from one casual ward to another, and, according to their statements, in none of these wards had they received fresh vegetable food.

I am, Sirs, yours faithfully,

SHERMAN TOOGOOD, M.D. Lond.

Shoreditch Infirmary, N. April 29th, 1889.

THE ETHER SPRAY IN STRANGULATED HERNIA.

To the Editors of THE LANCET.

SIRS,—In your last issue, Dr. Marett Tims describes a case in which he effected reduction of a strangulated hernia by aid of the ether spray. As he expresses uncertainty as to whether such application of the spray be novel and original, and invites correspondence upon the subject, I am led to communicate my little experience of the matter.

I first used the ether spray, as an adjunct to the taxis, seven months ago. The patient was an intractable old