vapour in the presence of artificial light. I was asked by a colleague (Mr. C. H. Harding) in the morning to see a case of hernia which he had been unable to reduce, and finding it strangulated we informed the patient of the nature and danger of the situation. He was unwilling for any operative interference at first, but realising that it was that or death he agreed that if there were no abatement of the symptoms in the evening he would undergo the operation. The room was small and without a fireplace and with no ventilation. It was warmed by an oil stove and illuminated by an oil lamp and a candle. The operation was a prolonged one, owing to the size of the hernia (nearly a foot of bowel in the sac and a large quantity of omentum which was ligatured in several sections and cut off). The patient was a bearded man and as so constantly occurs with these patients a large amount of chloroform was required. On the drop bottle being replenished some half ounce was spilt. Almost immediately a most pungent, disagreeable smell was noticed by myself which seemed to attack the whole respiratory tract from the nose to the middle of the sternum. My colleague, who was anæsthetising, next said he was becoming overpowered and the nurse who was assisting me was seized with a violent attack of coughing. After the administration of stimulants my colleague felt better; and the window was opened and some of the pernicious fumes let out. Mr. Harding was the first to throw off the effect, having quite recovered the next day. The irritative effect lasted four days upon myself, during which time I could not take a deep breath without pain at the middle of the sternum and a fit of coughing. The effect lasted longest on the nurse, who was not clear five days after the operation. The room next morning was pervaded by a strong odour of chlorine, which my colleague compared to bleaching works. The amount of chloroform used was somewhat over three ounces and about half an ounce was spilt. The chloroform in question was prepared by Messrs. Duncan, Flockhart and Co., and had no odour of any free chlorine. In reading the Herne Catholic Hospital case we all came to the conclusion that we had had a very lucky escape.

I am, Sirs, yours faithfully,

Whittlesea, Feb 27th, 1898.

JOHN J. WADDELOW.

"CHARGES TO PATIENTS IN ISOLATION HOSPITALS."

To the Editors of THE LANCET.

SIRS,—I have read your criticism of Dr. Meredith Young's paper and letter¹ with some surprise. I have attended scarlet fever patients for nearly forty years and superintended an isolation hospital for several years, and can endorse his statement that efficient isolation in private houses is impracticable even in what would appear very favourable circumstances. It is in consequence of this knowledge having been thrust upon them by experience that ratepayers are willing to provide themselves with means of isolation elsewhere and for that purpose find money for erecting and maintaining a suitable building. It appears to me an absurdity that the unfortunate members should be made to pay twice over. It is only those in distress for whom the ratepayers build and maintain the workhouse, to which all who are unfortunate enough to require it are entitled to admission. It is equally absurd to ask recompense from those who require admission to their own hospital as to those who require admission to their own workhouse.

I am, Sirs, yours faithfully,

J. ADAMS, M.D. St. And.,

Medical Officer of Health, Barnes District,
Barnes, S.W., March 5th, 1898. Richmond Union.

"A DEGREE FOR BRITISH PRACTITIONERS."

To the Editors of THE LANCET.

SIRS,—As your notice of my little book on the above subject suggests that my statement that a fluent candidate at the M.D. examination at the University of Brussels makes a better impression by occupying as long a time as possible in giving a systematic and complete answer to a query than does the less self-possessed candidate who gives

incomplete and fragmentary replies, and has therefore to deal with a far larger number of questions in the allotted time "surely cannot really be the case," I beg the favour of your insertion of this further comment. That my statement is a fact will be borne out by any candidate who has been present at one of the examinations, and I think there can be little difficulty in defending the principle involved. The Belgian professors are not examining raw students, but men duly qualified in Great Britain to practise medicine, surgery, and midwifery, and surely when asked a comprehensive question such as "What do you know of enteric fever?" a man cannot do justice to his knowledge and his ability as a "doctor" unless he considers the nature, pathology, symptoms, course, treatment, and prognosis of the disease in due order. I maintain that a man who can do this impresses the examiner with his fitness to practise his profession with credit thereto, whilst the fragmentary and incomplete replies of the less able candidate make him appear more like an unfledged student than a practitioner.

I am, Sirs, yours truly,

CHARLES REINHARDT.

South Stoke, Reading, March 6th, 1898.

* * The words "surely this cannot be the case" referred to Dr. Reinhardt's statement that it was impossible for an examiner to interfere when a candidate had once embarked on his answer.—ED. L.

MR. HORSLEY AND THE BUSINESS OF THE GENERAL MEDICAL COUNCIL.

To the Editors of THE LANCET.

SIRS,—Mr. Horsley's letter in the columns of THE LANCET of the 5th inst. gives further evidence of the obstructionist tactics with which his attempts at reform are systematically met. As Mr. Horsley was elected to the Council precisely that he might advocate a less apathetic policy and a less autocratic government, the electorate should take steps to show the Council that Mr. Horsley has the full approval and absolute confidence of his constituents in the fearless and straightforward policy which he has adopted. This end can perhaps best be attained by a public meeting of the profession before the May session of the Council. There is not the least doubt that such a meeting would cordially endorse Mr. Horsley's action and effectually prevent any affectation that he lacked the "mandate" of the electors. The ground would thus be cleared and a plain issue raised. Those who support the present unconstitutional methods of procedure or non-procedure and those who are determined to suppress every attempt at reform will have the advantage of knowing that their action is opposed to the wishes of the profession whose interests they are supposed incidentally to protect. Those also, if any, who doubt if Mr. Horsley has the support of the general practitioners will have their doubts resolved.

I am, Sirs, yours faithfully,

Frant, March 5th, 1898.

HAMILTON HALL.

HOSPITAL ABUSE IN GLASGOW.

To the Editors of THE LANCET.

SIRS,—Would you allow me to correct a trifling misapprehension on the part of your Special Commissioner as reported in your last issue? My friend Dr. Erskine advocates the municipalisation of hospitals. I do not. What I maintain is that our parochial (Poor-law) hospitals are our State hospitals and that they ought to administer to the medical and surgical necessities of the poor. Outside of this the hospital question is one of private and commercial enterprise. People who despise the State hospitals for their necessities ought not to be commiserated when professors in Glasgow compete for clubs for the remuneration of 2s. 6d. per annum!

I am, Sirs, yours faithfully,

Glasgow, March 6th, 1898.

D. CAMPBELL BLACK.

"THE TREATMENT OF BURNS AND OTHER SURFACE WOUNDS."

To the Editors of THE LANCET.

SIRS,—My attention has been called to a letter in THE LANCET of March 5th, p. 677, under the above heading. The writer, Dr. G. Archdall Reid, is quite right in thinking

¹ THE LANCET, Feb. 26th, p. 593, and March 5th, p. 676.