procured one. I had no difficulty in familiarising myself with the working of this machine, for its construction is simplicity itself. Needless to say there have been some temporary troubles such as occur to all cyclists—such as soiling of the trembler, slipping of the belt, misfiring from excessive lubrication, fouling of the sparking plug, &c.—but I have had no serious mishap or breakage. At the end of March I was a fairly efficient rider and I was able to get about with comfort and ease. In the second week of April I was able to dispense with the services of one horse and in the first week of June with those of a second. I do not care for cycling in wet weather and I am therefore not able to dispense entirely with horseflesh. The cycling has given me a great deal of pleasure and I have been able to get over my work in a much shorter time. My health is also much better, as I am now compelled to take more exercise. These facts are sufficient to indicate that motor cycling may be not only pleasurable but also profitable to the medical practitioner. The one drawback to motor cycling is the vibration, but this I have reduced to a minimum in my Werner by not inflating tightly my front tyre and by employing a large motor saddle. The vibration in my new two horse-power 1903 Werner has been reduced very greatly. With experience in riding it is not necessary to put any great weight on the handle-bar. On an open stretch of road with no obstacles my machine will steer itself without my touching the handle-bar.

My advice to those about starting motor cycling is to get a low frame of 22 or 24 inches. With this, if in difficulties from any cause, the feet of an average man can be put on the ground at once. Great speed is not necessary; a strong, reliable machine, from one and three-quarter to two horse-power, weighing about 100 or 125 pounds, with good brakes, is all that is required. With this machine most hills—all in my neighbourhood—can be climbed with ease. It is well to carry a spare belt and to change belts when the machine gives warning of belt-slipping. It will be well to carry on long journeys some spare parts such as springs, &c. There are many other details which I might supply, but if any man with average mechanical dexterity will carefully study the construction and working of his cycle he will have no formidable difficulties to contend with.

I am, Sirs, yours faithfully,
Cardiff, June 27th, 1903. P. R. GRIFFITHS.

INCOME TAX ASSESSMENT AND THE MEDICAL PROFESSION.

To the Editors of THE LANCET.

SIRS,—Mr. Ritchie in his Budget speech admitted the injustice of the manner in which the income tax is at present assessed and levied and promised to give the matter his consideration with a view to reform, and has within the last few days appointed a select committee of which Sir Michael Hicks-Beach is chairman. It is the plain duty of the medical profession to lay before the committee such evidence as will bring about an amelioration of our treatment. The long and costly training, the arduous nature of the work by night as well as by day, the inevitable and heavy expenses, the few prizes, the many blanks, and the small average net incomes, the strictly personal and precarious character of the work which causes all earnings to cease during illness or incapacity, the short average duration of life which is less than that of other professions, such as the clerical and legal, and the alarming increase of insanity from the intolerable strain, form strong grounds for claiming more lenient treatment than is at present accorded to us.

I am, Sirs, yours faithfully,
Harley-street, W., June 24th, 1903. J. FLETCHER LITTLE.

THE ROYAL DENTAL HOSPITAL AND ITS ANÆSTHETISTS.

To the Editors of THE LANCET.

SIRS,—On June 16th the committee of management appointed six honorary anæsthetists and two paid "house anæsthetists." The six senior anæsthetists were appointed in order of their former seniority on the staff, Mr. Harvey Hilliard being reinstated to the original seniority that he had lost through having once resigned his appointment. By this arrangement I was made seventh on the list and was consequently not reappointed.

The precise advantage gained to the hospital by not reappointing to the staff all who applied for reinstatement at the instigation of the circular letter of the chairman is not obvious. The late dental superintendent, upon whose criticisms the recent effort to get rid of the staff was based, is, I am informed, appointed to one of the paid appointments. Under the existing arrangement the anæsthetic work at the hospital will be conducted one morning or one afternoon each day by a paid "house anæsthetist" and not by an honorary anæsthetist. During the six months that the committee of management have been considering the matter the work of the anæsthetic department of the hospital has been conducted by the former staff of anæsthetists with only one hitch, the hitch being that the salaried official did not turn up at the hospital during the absence of one of the staff, so that the administrations had to be conducted by a qualified medical man who was a dental student.

I am, Sirs, yours faithfully,
Old Burlington-street, W., June 27th, 1903. GEORGE FLUX.

THE GENERAL MEDICAL COUNCIL AND THE ROYAL COLLEGES OF PHYSICIANS OF LONDON AND SURGEONS OF ENGLAND.

To the Editors of THE LANCET.

SIRS,—Under the above heading a letter appeared in THE LANCET of June 27th, p. 1839, from Mr. F. W. Collingwood, in which he writes, "no man will take a diploma when he has reasonable facilities for taking a degree, provided the respective standards nearly approximate." So far I am with him, but we part issue when he continues, "It is on these grounds that the Colleges should, I submit, be merged into the University of London."

Thanks to your courtesy this subject was pretty thoroughly gone into in your columns some six months ago, with a result which was more gratifying to those London graduates who took an interest in the matter than to the advocates of the scheme for associating the London University and Royal Colleges for examination purposes. I contended then, and I contend now, that the respective standards of the two sets of examinations do not "nearly approximate" and that therefore any suggestion that the two should be merged is unreasonable. It is in no dog-in-the-manger spirit that I oppose this scheme, but rather in that of the dog in the kennel who has only won there with some difficulty and who, not unnaturally, therefore, eyes with disfavour any attempt to force an entrance from the rear. Anyone who cares to know the *pros* and *cons* of this question can learn them by looking up the back numbers of THE LANCET.

I am, Sirs, yours faithfully,
Fulham, June 29th, 1903. C. FRANCIS STEELE.

THE MUTILATION OF PRESCRIPTIONS.

To the Editors of THE LANCET.

SIRS,—I am sending under separate cover a copy of the *Eastbourne Gazette* which contains the report of a case of importance under the Food and Drugs Acts. A prescription was written and taken by a sanitary inspector to various chemists and in one instance 78 per cent. of the principal drug—viz., mercuric chloride—was left out, although only one-sixteenth of a grain per dose had been prescribed by me. What I think is interesting to call attention to is the extraordinary defence of the defendant's solicitor—namely, that as it was the ordinary full dose as given by the British Pharmacopœia he thought it would be safer to give a smaller dose. Such an extraordinary proceeding deposed to by a chemist before the magistrates, involving the altering of a medical man's prescription to suit his fancy, is, I should say, unique.

I am, Sirs, yours faithfully,
Eastbourne, July 1st, 1903. W. G. WILLOUGHBY,
Medical Officer of Health.

* * We have read the report in question, which shows well how entirely the public and the medical man are at the mercy of the druggist. The circumstances in which a well-merited conviction was arrived at may be detailed later.—ED. L.