after the onset of the fever. A few patients complained of burning pains in the soles of their feet. The peculiar green stools mentioned by Professor J. Dreschfeld in Allbutt's "System of Medicine" were noticed towards the end of a relapse in two cases. Hæmaturia was noticed in two cases and nephritis with retention of urine and œdema of the face in one case. A case of the apyrexial form of typhoid fever was met with in a boy aged ten years. His temperature was normal throughout with the exception of a single rise on one occasion to 101·6° F. and his pulse was slow—from 56 to 60 per minute. All the other symptoms associated with typhoid fever were present.

Towards the end of the outbreak measles was very prevalent and three cases were seen where typhoid fever and measles were running concurrently. The first case was that of a boy, aged five years, who had a typhoid rash on Feb. 24th and a measles rash on the 26th. He also had hæmorrhage from the bowel on March 3rd and 4th. The second case was a boy, aged six years, who had a typhoid rash on March 19th and a measles rash on the 26th. The third case was a boy, aged six years, who had been troubled with a tapeworm for three and a half years. The typhoid rash appeared on Feb. 17th and on March 21st the measles rash came out. He had troublesome diarrhoea, passed blood on many occasions, and now and then parted with segments of the tapeworm. Two other children in the same house were down with measles at the same time. The symptoms of both diseases were not modified in any way in any of the cases.

I am, Sirs, yours faithfully,

J. F. HODGSON,

Assistant Medical Officer of Health, Halifax.

July 3rd, 1905.

HYDROCHLORIC ACID IN THE GASTRIC CONTENTS AND CANCER.

To the Editors of THE LANCET.

SIRS,—The paper read by Professor B. Moore at the Royal Society and published in THE LANCET of April 29th, p. 1120, on the absence or marked diminution of free hydrochloric acid in the gastric secretion in cases of cancer other than gastric seemed to offer an easy method for solving the difficulty of diagnosing between malignant and benign new formations. I have recently had opportunity of testing the gastric contents in eight cases of cancer where implication of the stomach could be excluded. In four there was absence of free hydrochloric acid in the fluid drawn off from the stomach after a test meal. In the other four there was a very marked positive reaction. All the eight cases have been examined microscopically. I was rather disappointed at this result as I had hoped that at last an easy method for distinguishing between innocent and malignant growths had been devised. This, however, does not appear to be the case, for although the test (i.e., phloroglucin and vanillin) was applied only qualitatively, yet it is sufficiently sensitive to allow the observer to obtain a fair estimate of the quantity of free acid present. To apply it quantitatively is at present outside the region of ordinary practical clinics. All the eight patients were treated alike but the fluid drawn off was very dissimilar and the difference in quality may possibly afford a clue to the discrepancy in the results, for in those without acid it was watery and had almost no solid, while in those which gave a marked reaction it was semi-fluid and contained much solid matter.

I am, Sirs, yours faithfully,

Westminster Hospital, S.W., July 3rd, 1905.

R. G. HEBB.

RUSSIA'S SECOND CONGRESS ON PSYCHIATRICS: 18 YEARS' INTERVAL.—The Second Congress of Russian Psychiatrists will be held in Kieff from Sept. 17th to 24th next. One of the psychiatric societies had expressed the opinion to the organising committee that in view of the difficult situation in which Russia finds herself just now the holding of the congress seemed inopportune. The organising committee nevertheless explained the extreme necessity and urgency, as to time, of the congress, the chief cause being "the imperative call for attention by the unfortunate psychiatric patients in the hospitals, the last congress on the subject having taken place 18 years ago. Besides which it was necessary to think of, and to consult on, those new highly complicated cases resulting from the present serious war and the tension undergone by the people in the great upturn in their social life." The report, says the *Novoe Vremya*, will be printed at the public cost.

DAVOS-PLATZ.

LAWS AND REGULATIONS IN REGARD TO TUBERCULOUS PATIENTS.

(FROM OUR SPECIAL SANITARY COMMISSIONER.)

I.

DAVOS-PLATZ is so well known as a station for the treatment of pulmonary tuberculosis that it is not necessary to attempt a general description of the place or a recapitulation of its history. Suffice it to say that Davos is a valley which, though situated at 5350 feet above the sea, is nevertheless surrounded by high mountain scenery, some of the mountains in the immediate neighbourhood reaching an altitude of more than 10,000 feet. The result of this situation is an average temperature similar to that of St. Petersburg—namely, 36·5° F. From the middle of November till the end of April the place is deeply covered with snow, but, on the other hand, there are powerful sunshine, clear, pure, strong light, reduced atmospheric pressure, no fog, few clouds, very little moisture or rain, and shelter from the colder winds. It was not, however, till 1865 that two invalids suffering from pulmonary tuberculosis ventured to pass the winter there. The result was so favourable that others followed their example and thus the sparsely inhabited mountain valley became the present fashionable winter station. The influx of visitors increased so rapidly that the simple peasants who lived in these mountains did not know what to do with all these strangers. Davos-Platz was but an official centre where the church, the municipal building or Rathhaus, the post-office, and a few houses clustered together. Most of the natives live in wooden cottages built in the midst of their fields and dotted about over the vast commune. This is one of the reasons why the statistics in regard to the immunity from infection among the natives are of but little importance. It has been said that if tuberculosis is infectious then there would be an increase in the number of cases among the native population. A considerable effort has been made to obtain statistical information on this point and such observations might be of universal interest. The statistics obtained are not, however, absolutely trustworthy. There has been no attempt to manipulate the figures. What has been done has been honestly done. But in these sparsely populated mountainous districts skilled medical attendance is not easy to obtain and sometimes the only evidence as to the cause of death was that given by friends or relatives. Nevertheless, it is fairly evident that the native population has not been infected by the advent of an enormous number of visitors. The death-rate from tuberculosis among the natives has been below 1 per 1000 per annum. On the other hand, the statistics are based on the number of inhabitants of the whole commune which includes not only Davos-Platz and Davos-Dorf but many miles of surrounding pasture land and mountain. During the 25 years 1876 to 1900 the average native population numbered 1315 and among them there were in that time 36 or 38 deaths from tuberculosis according to whether two doubtful cases are included or not. This is equal to an annual death-rate from tuberculosis of 0·91 or 0·97 per 1000. Only 4·64, or 4·94, per cent. of the total deaths were due to tuberculosis. On the other hand, another set of statistics gives the numbers showing the immense increase of population and of visitors. These amounted to 6830 in 1886, to 10,167 in 1890, and to 15,800 in 1900. In addition to this and in accordance with the census of Dec. 31st, 1900, there were in the commune of Davos 1387 burgesses—that is, peasant proprietors or natives; 3086 other Swiss inhabitants, and 3861 foreigners who had settled in the town. Of these there were 266 Swiss and 2268 foreigners notified as having taken up their residence in the commune for at least three months and probably for a longer time. All who did not remain three months at Davos were counted among the 15,800 visitors.

The problem presented by Davos is that of a valley high up in the mountains with a sparse and scattered native population suddenly invaded by a large number of patients, a smaller number of pleasure-seekers, and then again a large number of hotel-keepers and their servants, of shopkeepers and their assistants. The sturdy peasants of Davos might