The statutes under which coroners' juries are called upon to serve are the Juries Acts, 1825 and 1870, and the Coroners Act, 1887, and certainly in neither of these is mention made of such a person as a foreman, and I am unaware of the recognition of such a one in any statute. There cannot, therefore, be any statutory obligations to administer the oath primarily and separately, as stated in your annotation on the matter, to a person unknown to the law. Section 3 (1) Coroners' Act, 1887, provides that the coroner shall issue his warrant for summoning not less than twelve or more than twenty-three good and lawful men to inquire as jurors touching the death, &c. And Sub-section 3 provides, "When not *less than twelve* jurors are assembled they shall be sworn by or before the coroner diligently to inquire," &c. Further, Section 4 (5) provides: "In case *twelve at least* of the jury do not agree on a verdict the coroner may adjourn the inquest to the next session of Oyer and Terminer and Gaol Delivery held for the county or place in which the inquest is held, and if after the jury have heard the charge of the judge or commissioner holding such sessions twelve of them fail to agree on a verdict, the jury may be discharged by such judge or commissioner without giving a verdict."

I think the above extracts support me in the view I have always taken, that the foreman of a jury is chosen by his fellows rather as a matter of convenience, in order that their opinions may be canvassed by him, and through him their conclusions be conveyed to the coroner. In other words, he is simply chosen as their spokesman. Under the heading "Jury," Number, Sidney Taylor, on the Law of Coroners, says: "Not less than twelve nor more than twenty-three. As a verdict cannot be given by less than twelve, it is as well to have thirteen or fourteen in all cases, and even more where there is any probability of an adjournment, so that the death or illness of one or two of the jurymen may not bring the jury under twelve." The same authority, under "Swearing," &c., says: "Not less than twelve having been assembled, a foreman should be appointed. This is generally done by the jury selecting one of their number, but the coroner will make his own appointment if the jury do not agree. The jury should then be sworn in the form provided in the schedule to the Coroners' Act, 1887. This *need not be super-visum corporis* or all at the same time. Some coroners swear first the foreman and then the rest, *but nothing is gained thereby*, and it is more convenient either to swear all at once on several Testaments or to swear half first and then to swear the remainder" according to a short form given. It is the practice of some at least of the metropolitan coroners to adopt the plan of swearing the jury all together on several Testaments, and in cases where the jury do not without undue delay select one of their number as foreman to nominate the first on the list to so act, a plan adopted in other courts and for which further support is found in "Jervis on Coroners," p. 17, as follows: "The oath should be first administered to the foreman, who may be the first jurymen called or may be nominated by his fellows."

I think it reasonable to assume that the Legislature contemplated, *inter alia*, the possibility of absence of unanimity arising in coroners' juries, hence the number to serve not being limited to twelve, as is the case of other common law juries. In the particular instance out of which the question here discussed arose I pointed out to the foreman that while I regretted he was amongst the dissentients he might have been the only one to disagree, and then how manifestly unfair would it have been not only to the other members of the jury, but also to an accused person, if undue weight were to be given to the opinion of one member; and may I not reasonably add that if one member of a coroner's jury had the power to veto the conclusions arrived at by the other members, a door might thereby be opened to the perpetration of injustice and corruption in their worst forms.

I am, Sirs, yours truly,

G. E. YARROW,

Deputy Coroner for North-East London.

Duncan-terrace, N., Oct. 9th, 1895.

"ADVERTISING IN HIGH PLACES."

To the Editors of THE LANCET.

SIRS,—Has not your correspondent "M.R.C.S." overlooked your headline "Audi alteram partem"? I should have been glad of the opinion of the best authority in

some urgent cases, but have been deterred from seeking the same, as in a recent case, by the almost certain fact that during August and September one's patient would no doubt see a reliable substitute, but not Dr. or Mr. ——. I cannot help thinking that a list of probable dates of absence from home of eminent physicians and surgeons in THE LANCET or other professional paper would be of service to others as well as to,

Yours faithfully,

B. FARADAY GILES, M.D. Durh.

Hornsey, N. Oct. 14th, 1895.

AN EARLY METHOD OF INTESTINAL APPROXIMATION.

To the Editors of THE LANCET.

SIRS,—A few days ago, while looking up a subject in South's "Translation of Chelins's System of Surgery," published in 1847, I found on p. 464 of vol. i. the following words: "In complete division of the intestine Denans introduces into the upper and lower end of the gut a silver or zinc ring, thrusting it in inwards about two lines from each end; he then brings the two ends together over a third ring, of which the two springs retain the external rings. The included ends of the intestines mortify, and the rings thereby becoming unfastened are discharged by stool after they have united the serous surfaces in contact. This experiment in the dog has most successful results."

Chelins gives as his reference "Recueil de la Société Royale de Médecine de Marseille, 1826." The resemblance which the above-mentioned instrument must have borne to the modern Murphy's button is, indeed, remarkable, for while its mechanical details were evidently strikingly similar its mode of action must have been precisely the same. Truly there is nothing new under the sun.

I am, Sirs, yours truly,

Birmingham, Oct. 15th, 1895.

LEONARD GAMGEE.

DENTAL QUACKERY AND THE GENERAL MEDICAL COUNCIL.

To the Editors of THE LANCET.

SIRS,—As an old reader of your valuable journal, may I respectfully ask the General Medical Council if the time has now arrived for vigorous action against breaches of the memorandum issued a long time ago to registered dental practitioners with regard to the employment of unregistered persons to perform operations in dental surgery? It is notorious that with very few exceptions that memorandum has been and is now wilfully ignored. How farcical is this state of affairs, and what a greater farce is the present Dental Act. I would also like to ask if the great army of dental quacks (companies and individuals) now practising dental surgery and administering anæsthetics *ad lib.* cannot be convicted under the Medical Act. In the face of the grossest ignorance and assumption on the part of unregistered persons, it is surely time for amending the Dental and Medical Acts.

I am, Sirs, your obedient servant,

Oct. 15th, 1895.

INQUIRER.

"SPECIALISM IN MEDICINE."

To the Editors of THE LANCET.

SIRS,—The letter of your correspondent, Mr. Blake, in THE LANCET of the 14th ult., gives the two common objections to specialists, each of which is opposed to the other. He remarks that "any good all-round physician or surgeon" would be much preferred to a specialist, though he adduces no reason for this statement; and, a little later, "were the specialist to strictly adhere to the particular branch which he has chosen he would be held in higher estimation" &c. According to the first statement the more varied (all-round) his practice the better a consultant would be, and to the latter the more limited. No doubt there is some truth in both, but the practical issue would be that a specialist should first be a good "all-round" practitioner, and then, having a predilection for some branch and giving special attention to it, he would gradually become more and more a true specialist, though it is probably advisable that even a specialist should have some general work. Every practitioner is probably at heart a specialist, and takes more interest in, and devotes more attention to, certain diseases than others. And it