Correspondence.

*"Audi alteram partem."*THE MEETING OF FELLOWS AND MEMBERS
AT THE COLLEGE OF SURGEONS.*To the Editor of THE LANCET.*

SIR,—In reference to the letter of the 4th instant from Mr. Vincent Jackson, which appeared in THE LANCET of the 8th instant, in which he advocates, for the reasons stated by him, an alteration in the day fixed for the meeting at the College of the Fellows and Members, I am desired by the President to state that, owing to the meeting of the General Medical Council (in which Council he is the Representative of the College) being fixed for the 25th instant, and to the almost certainty that such meeting will occupy the remainder of the week, it has been found impossible to arrange for any other day in that week than the 24th instant.

I am to add that, whilst it would not be practicable to convene the meeting for an earlier date than the 24th inst., it would be necessary, should that date be altered, to postpone it until after the completion of the College Examinations, which will commence on the 31st instant, and will not be concluded until about the 31st of May next, thereby putting off to too remote a date the discussion of the subject for which the meeting is to be summoned.

I am, Sir, your obedient servant,

EDWARD TRIMMER, Secretary.

Royal College of Surgeons March 13th, 1884.

To the Editor of THE LANCET

SIR,—As the Council of the College is elected by the Fellows, may I suggest that provision be made in the new Charter or bye-laws for the holding of a meeting of the Fellows immediately before they proceed to the annual election of members into the Council. On this occasion the Council might make a statement relating to the business of the College during the preceding twelve months, and thus practically recognise the relationship between electors and elected.

Your obedient servant,

Liverpool, March 10th, 1884.

REGINALD HARRISON.

FIBROMA IN THE LOWER PART OF THE
UTERUS OBSTRUCTING LABOUR.*To the Editor of THE LANCET.*

SIR,—Mr. Farrant Fry has, in your last number, described a very interesting case of tumour in the lower part of the uterus and cervix, obstructing labour very seriously, though it was overcome by traction of the foot, which presented. After this was accomplished, finding it could be enucleated, he removed it by this plan, and the patient made an excellent recovery. He remarks that though this plan has been generally condemned, yet the results of this case point to a different conclusion. My object in writing is to support the attempt to enucleate these growths, which occur very low down in the uterus and cervix during labour rather than after. A similar case, but more difficult of delivery, occurred to myself in consultation, described in the twelfth volume of the Transactions of the Obstetrical Society of London, 1871, where, after various attempts to deliver had failed, I divided the capsule posteriorly and found no difficulty in enucleating the tumour, whereupon the head came down and delivery was accomplished by nature almost immediately. In Mr. Farrant Fry's case the enucleation evidently would have been very easily accomplished, and the records of tumours in this position independent of pregnancy lead to the conclusion that whatever may be our objection to enucleation of a fibroma high up, in this position this mode of removal is most likely to be successful. I am not aware of any other cases on record where this point is so distinctly shown as in these two instances, and I think it is as well that in view of their rarity our ideas should be more defined as to treatment.

I am, Sir, yours obediently,

J. BRAXTON HICKS.

George-street, Hanover-square, March 10th, 1884.

PAYING PATIENTS AT GUY'S HOSPITAL.

To the Editor of THE LANCET.

SIR,—Allow me to remark that the observations contained in your last issue on the introduction of paying patients into Guy's Hospital are founded on a misapprehension. Owing to the great reduction of income arising from the general agricultural depression, the funds of the hospital have been insufficient to maintain the usual number of free beds, and the financial position of the hospital has become seriously embarrassed. It was therefore a question of either closing a certain number of beds altogether, or of retaining them for paying patients. At the present time there are 400 free beds, though the means for keeping up this number has only been obtained through the liberality of a few personal friends of the hospital and the medical staff. The governors earnestly trust that their income may not further fall away; and if it should return by degrees to its old standard, they are prepared simultaneously to return to the former number of free beds.

I am, Sir, yours obediently,

E. H. LUSHINGTON, Treasurer.

Guy's Hospital, March 12th, 1884.

* * The Treasurer's vindication of the unprecedented use of Guy's Hospital is, of course, the only one that will bear looking at. The worst of such use of charitable property is that it inspires commercial ideas. We shall look anxiously for the restoration of the alienated beds—if they must be alienated—to their former use.—ED. L.

"POISONING BY ARSENIC."

To the Editor of THE LANCET.

SIR,—It is desirable to make a remark on Dr. Stevenson's letter in THE LANCET of March 8th. In the case of Thomas Higgins a small portion of the spleen contained more than six times as much arsenic as the same weight of liver, while the intestines contained an intermediate proportion. There was very little arsenic in the liver. These facts, taken with the other evidence, justified the opinion which I expressed. I quite agree with Dr. Stevenson that the mere presence of arsenic in the spleen is not evidence, and, accordingly, in the case of Margaret Jennings I declined to express an opinion, although I found arsenic in the spleen. The most important inference which both Mr. Davies and I drew in all the cases from the presence of arsenic in the spleen seems to have been missed—namely, that the arsenic was distributed throughout the whole body, and therefore the quantity of arsenic taken must have been much larger than the amount found in the viscera. On the first point of Dr. Stevenson's criticism, I should say that it was very natural for a non-professional reporter to omit to record my denial that we *must necessarily* have found solid arsenic if it had been taken, and, again, a similar denial with regard to soot and indigo, and to strengthen or exaggerate the meaning of my more cautious expressions.

I am, Sir, yours, &c.,

March, 1884.

J. CAMPBELL BROWN.

To the Editor of THE LANCET.

SIR,—In reply to Dr. Stevenson's letter in your issue of the 8th inst. relating to Dr. Campbell Brown's evidence at the recent trial for arsenical poisoning, I desire to make the following remarks. All the Liverpool papers, including the *Courier*, from which Dr. Stevenson quotes, gave only a summary of the evidence, and frequently important qualifying statements were left out. Dr. Campbell Brown did not state that if solid arsenic had been given he would have found it; but he did state that the absence of solid arsenic in all the cases would point to its having been given in solution.

The data on which I relied to give the positive opinion that Thomas Higgins died from successive doses of arsenic were the symptoms chiefly, and also the post-mortem appearances, and of these the important conditions were the uniform distribution of the irritation and inflammation throughout the entire extent of the intestinal tube. Had there been no evidence as to the character of the symptoms,