facts should be also made known. Some years ago, recognising the very great importance of the subject, I suggested to Professor Sherrington that he should undertake the research in question, and I detailed the plan of the investigation. As Professor Sherrington says in his note, he began the experiments, but failed to obtain reliable results. In consequence of this he informed me later that he had abandoned the research and had taken up other work. Feeling, however, the necessity of having the point cleared up, I told Dr. Mellus last year that, as Professor Sherrington had given up the subject, he had better undertake it. This he did and speedily brought the matter to a successful conclusion. The Royal Society have now had his preliminary paper in their possession for about two months. Of course, as a matter of ordinary courtesy, I wished to inform Professor Sherrington when Dr. Mellus began his research. This I intended doing at the first opportunity—viz., at the first meeting of the Physiological Society—but as I was suddenly prevented from attending the meeting I asked Professor Boyce to tell him for me. Although some months have elapsed since Professor Boyce's conversation with Professor Sherrington, no notice of his having again taken up the work reached either Dr. Mellus or myself till the day of publication of your last issue. I need hardly say that, had Dr. Mellus and myself received the least intimation of such a thing, I would have arranged for a common publication of the two papers, as there is no question of priority since Muratoff's well-known researches.

I am, Sirs, yours truly,

VICTOR HORSLEY.

Feb. 7th, 1894.

"THE MORTALITY FROM CANCER."

To the Editors of THE LANCET.

SIRS,—The following points occur to me after perusing the valuable paper upon the mortality from cancer noticed in your last issue. It appears that at Frankfort between 1860 and 1889 the mortality amongst females from accessible or easily diagnosed cancer remained stationary, whilst that from inaccessible cancer difficult of diagnosis increased considerably. These facts are doubtless a strong argument in favour of the theory held by Mr. King and Dr. Newsholme that the increase in the registered mortality from cancer is not real but is due to improved diagnosis and more careful registration. If this theory be correct the curve representing the true yearly mortality through any length of time from cancer would be a horizontal right line. But, turning to the curves given in the writers' paper representing the British registered cancer mortality, we find them to be all inclines, most of them having increasing gradients. These curves, although the registered mortality has more than doubled in the thirty years, show no signs of converging towards a horizontal right line, and on Mr. King's and Dr. Newsholme's theory, therefore, the British statistics are so inaccurate as to make them quite useless for the writers' purposes. If, however, we give the British figures more credence than Mr. King and Dr. Newsholme seem disposed to do, seeing that the cancer curves given in the paper are inclines and on the whole show a tendency to tilt upwards, we should infer that the true curves were inclines to which Mr. King's and Dr. Newsholme's are approximatory, and that cancer had really increased, although this increase might be exaggerated from faulty diagnosis and registration. The Frankfort figures no doubt are opposed to this view, but they are not very numerous—only twenty-seven cases on the average dying annually, for instance, of accessible cancer. The British figures do not seem to be sufficiently accurate to determine with any precision the relative increase in cancer according to sex: the Scotch male and female curves converge, the English run parallel, and the Irish slightly diverge. The exact parallelism of the English male and female curves is very striking, but, considering the known inaccuracy of British registration, this must depend to some extent upon coincidences; at any rate, I fail to see how it can have any significance on Mr. King's and Dr. Newsholme's theory, for we have seen that none of these curves have even begun to approach the true ones. The general impression left in one's mind after studying the writers' paper is one of regret that our record should be so imperfect that, in spite of the extensive labours and masterly methods brought to bear upon their subject, they have been unable to arrive at a result which would be received without question.

I am, Sirs, yours truly,

THOS GLOVER LYON

Feb. 6th, 1894

MEDICAL DEFENCE AND PROTECTION.

To the Editors of THE LANCET.

SIRS,—In THE LANCET of the 3rd inst. there is a statement which—of course quite unintentionally on your part—may mislead some of your readers. This statement is in the last sentence but one of your annotation headed "The Medical Defence Union," and it reads thus: "If the Medical Defence Union could see its way clear, by any little concessions in return for other little concessions, to amalgamate with the London and Counties Medical Protection Society, the joint value to the medical profession of the two bodies working as one would certainly be more than double the sum of their separate efforts." I venture to say that no unprejudiced person who is familiar with the facts of the case could name even one point in the recent and futile negotiations for the amalgamation of these two societies upon which it was reasonably possible for the London and Counties Medical Protection Society to have gone further than it went in the direction of concession. This we did not for the sake of the amalgamation of our society with the Medical Defence Union, but because we were ready to sacrifice much for the sake of securing to the medical profession the very great advantages which can come to it only when it has, within itself, one large and powerful society whose first duty will be to defend its members against unjust attacks upon their professional reputation and interests. It was to secure this great good for our profession that the delegates of the London and Counties Medical Protection Society entered upon the negotiations for amalgamation with the Medical Defence Union; it was with that object in view that they carried on the negotiations. These efforts to bring about amalgamation were ended, not by the refusal of any demand which was made upon the London and Counties Medical Protection Society by the Medical Defence Union, but because the latter would not submit their office-bearers to a measure of scrutiny which they themselves proposed to apply to the office-bearers of the former.—I am, Sirs, yours truly,

G. A. HERON,

Treasurer of the London and Counties
Medical Protection Society.

Feb. 5th, 1894.

To the Editors of THE LANCET.

SIRS,—We are glad to find that the report of the Medical Defence Union meets with your approval. With regard to your suggestion as to the advisability of amalgamation with similar societies, everyone will agree. There is one very simple way by which this desire could be accomplished without any further difficulty. Let the members of junior societies resign and apply for membership to the senior society. The desired end would then be accomplished very quickly and without further trouble. It is difficult to understand why new medico-legal societies should be required when the Union has done such good work, or why, when formed, those responsible for their formation should try to force amalgamation, with its many difficulties. "Union is strength," and the Medical Defence Union does not belie its name. It is a sad commentary on the progress of the profession that the moment a society is doing good work, other societies should spring up on similar lines, instead of the profession concentrating its efforts on that originally formed.

I am, Sirs, yours truly,

Longridge-road, S.W.

A G. BATEMAN.

"THE MEDICAL REPORTS OF THE METROPOLITAN ASYLUMS BOARD."

To the Editors of THE LANCET.

SIRS,—I have read with much interest the leading article on the above subject which appeared in THE LANCET of the 3rd inst. It struck me very early that the compulsory notification of infectious diseases would operate in two ways, and as time has passed I have been more and more convinced of this. Formerly the medical attendant gave advice and took trouble to ensure the complete isolation of infectious cases while doing all in his power to prevent any spread of the disease. Now in cases requiring special care as regards isolation, &c.—I refer, of course, to those arising amongst the poorer classes—the medical attendant in five instances out of six prescribes for his patient, walks out of the house, and on his return home sends his half-crown's worth to the medical officer of health. I have

known a medical officer to a public institution affirm that it is not now his business to advise or take any trouble in preventing the spread of infectious diseases, even in the institution with which he is connected, beyond giving notice to the medical officer of health. To use your words, it is clear that "the Notification Act is not going to accomplish the result of curtailing the proportion of epidemics as has been expected."

I am to a certain extent an advocate for isolation hospitals, but to a certain extent only. In this union, where we are continually meeting with diphtheria, scarlet fever, small-pox, &c., whether imported or from sources which I need not now enter into, I have for many years adopted a very simple but at the same time what has proved to be a most efficacious plan for staying the spread of the disease. It is that directly notification is received a reliable man is engaged by the sanitary inspector to act as watcher and messenger to the inmates of the infected cottage, which is, as it were, made an isolation hospital for the time being. This messenger goes to shop, supplies disinfectants, buries dejecta, but never enters the infected house. Excepting one instance—and I speak of many hundreds of cases—I have never known the disease to spread from the infected centre. Experience has proved that the scheme answers equally well whether it is in an isolated country cottage or in more populous places. I am of opinion that if this plan had a fair trial in towns it would have a far larger share of success than the crowding together of infectious cases in a hospital. I would limit the removal of patients to a hospital to those houses occupied by two or more families, where isolation would be impracticable. The most difficult of these diseases to stamp out is undoubtedly scarlet fever, but I have found that if oiling the body is only commenced in the early stages and the scheme suggested rigorously carried out any spread of the complaint need not be much feared. While disinfecting as much as possible I have never hesitated to order the burning of infected articles, and I have never experienced any difficulty in having the owners allowed for the same or having them replaced.

I am, Sirs, yours truly,

C. J. DENNY,

Medical Officer of Health.

Blackwater, Feb. 6th, 1894.

"OBSTETRIC AND GYNÆCOLOGICAL NURSING."

To the Editors of THE LANCET.

SIRS,—I have no wish to trespass further on your patience by protracting a controversy with the reviewer of "A Handbook of Obstetric and Gynæcological Nursing" on a matter of interest chiefly to myself. Through your courtesy I have been afforded an opportunity, for which I thank you, of stating my complaint. To that he has replied and has reiterated—though, as I venture to think, he has not succeeded in proving—the accusation of my insufficient recognition of the importance of asepsis and antiseptics in ordinary midwifery practice. As we each adhere to our own contentions the matter may, I think, be best left to the impartial judgment of your readers, who have both our statements before them.

I am, Sirs, yours truly,

THOS. MORE MADDEN.

Merrion-square, Dublin, Feb. 3rd, 1894.

"OPIUM IN INFLUENZA."

To the Editors of THE LANCET.

SIRS,—Dr. Wilks' letter on the value of opium in influenza, which appears in the present issue of THE LANCET, encourages me to speak of its very great success in my own experience. In the early weeks of 1892, when I was treating about 100 cases a week, and in all the partial epidemics since, I have uniformly given ten drops of tinct. chlorof. c. morph. every four hours till the pains were gone, and strychnine, with hydrochloric acid, and a little iron after as a tonic. This treatment has proved so uniformly successful that I cannot recall the loss of a single patient from influenza. I had special opportunities for testing its value in having then under my care (1891–1892) the employés of two large houses of business, in neither of which a single life was lost, whereas deaths occurred in two other houses in the neighbourhood under the same conditions. I should not have recorded these facts now but that, justified by the experience

of Dr. Wilks, I felt that further practical evidence as to the value of opium would be of value.

I am, Sirs, yours truly,

A. T. SCHOFIELD, M.D.

Westbourne-terrace, Hyde-park, W., Feb. 5th, 1894.

MANCHESTER.

(FROM OUR OWN CORRESPONDENT.)

Ladies' Health Society.

THE annual meeting of this, one of the oldest and best of all the societies for the amelioration of the condition of the poor, was held on Tuesday last, in the Manchester Town-hall, under the patronage of the Lord Mayor and Lady Mayoress. The report, which was presented by the honorary secretaries, gave evidence of an enormous amount of good work in the oldest and most crowded districts of the city, and, what is of great importance, the several lady superintendents gave particulars of the adverse conditions obtaining in their districts, with copious extracts from the reports of their district visitors, suggesting in each individual case the appropriate remedy. It is to be hoped that the corporation will take notice of these reports and that they will take immediate steps to remedy the scandalous abuses which are therein brought to notice. As is usual with societies of this kind, the annually recurring difficulty is that of obtaining the necessary funds to carry on the work. The society consists of about thirty ladies, who work in connexion with the Manchester and Salford Sanitary Association, on the one hand, and with the medical officer of health, on the other. It employs fourteen female health visitors, eight of whom are paid by the society and six by the Manchester corporation. It deserves far greater and more generous support than it receives, and, as one of the speakers at last week's meeting observed, the contribution which it annually receives from the well-to-do classes of Manchester is altogether unworthy of this great and opulent community.

The Tramp Question.

The three boards of guardians, whose jurisdictions are conterminous, or nearly so, with the enlarged city of Manchester, have recently been discussing the terms of the recommendation first submitted to them by the city council, which is to the effect that in the council's opinion, at any rate, the present tripartite division of the city for Poor-law purposes is an anomaly, and that the three unions ought to be amalgamated so as to form one large and strong union for the districts comprehended within the present city. It will be remembered that a few months since two, at least, of these boards were considerably inconvenienced by the difficulty experienced at that time in providing adequately for the tramps who persisted in flocking nightly to the wards in great numbers. The proposal that additional accommodation for the floating pauper population should be provided met with but little favour at the time, because it was known that at one of the workhouses in the city abundant tramp room existed, which was scarcely ever occupied, and it was therefore held to be an unnecessary waste of public funds to provide further accommodation until that which then existed was exhausted. The suggestion of the city council seems to be a wise one, and it is to be hoped that the boards of guardians concerned will look carefully into the matter before deciding to reject it.

Notification of Measles.

The medical profession of Manchester, as represented by the Medico-Ethical Society, has had before it the question of whether or not certain infectious diseases, not at present notifiable under the Local Act in force here, should be reported to the sanitary authority. They have accordingly suggested that, by way of a beginning, the notification of all cases of measles should be henceforth required in Manchester, as is at present the case in Salford, and they have petitioned the sanitary committee of the corporation accordingly. There are, of course, many objections to the application of the Notification Act to such a disease as measles. In the first place, not one tithe of the cases occurring amongst the poor are ever seen by a medical man at all, so that only the patients who are carefully tended at home would be notified, the remainder, who form the most dangerous portion of the cases, being left to spread infection wholesale. It is held by many medical men of experience that until arrangements are made for the