in Sheffield. One death from small-pox occurred in London, but not one in any of the twenty-seven provincial towns; 16 small-pox patients were under treatment in the Metropolitan Asylum Hospitals, and not one in the Highgate Small-pox Hospital, on Saturday last. The number of scarlet-fever patients in the Metropolitan Asylum Hospitals and in the London Fever Hospital at the end of the week was 885, against 927 and 916 at the end of the preceding two weeks; the patients admitted during the week were 66, against 66 and 88 in the previous two weeks. The deaths referred to diseases of the respiratory organs in London, which had declined in the preceding three weeks from 620 to 591, further fell last week to 547, but were more than double the corrected weekly average. The causes of 95, or 1·9 per cent., of the deaths in the twenty-eight towns were not certified either by a registered medical practitioner or by a coroner. All the causes of death were duly certified in Portsmouth, Norwich, Plymouth, Wolverhampton, Derby, and Birkenhead; the largest proportions of uncertified deaths were recorded in Liverpool, Preston, and Salford.

HEALTH OF SCOTCH TOWNS.

The annual rate of mortality in the eight Scotch towns, which had declined in the preceding three weeks from 24·1 to 23·3 per 1000, rose again to 25·3 during the week ending June 6th, but was 2·7 below the mean rate that prevailed during the same period in the twenty-eight large English towns. The rates in the eight Scotch towns ranged from 17·1 in Leith and 18·6 in Perth to 28·7 in Greenock and 30·4 in Paisley. The 651 deaths in these towns showed an increase of 44 upon the number in the preceding week, and included 27 which were referred to measles, 25 to whooping-cough, 10 to diarrhoea, 4 to diphtheria, 3 to scarlet fever, 3 to "fever," and not one to small-pox. In all, 72 deaths resulted from these principal zymotic diseases, against 84 and 67 in the preceding two weeks. These 72 deaths were equal to an annual rate of 2·8 per 1000, which exceeded by 0·8 the mean rate from the same diseases in the twenty-eight English towns. The fatal cases of measles, which had been 34 and 23 in the preceding two weeks, rose again last week to 27, of which 18 occurred in Glasgow and 5 in Paisley. The deaths from whooping-cough, which had declined from 32 to 22 in the previous three weeks, were 25 last week, and included 13 in Glasgow, 5 in Dundee, and 3 in Leith. The 10 fatal cases of diarrhoea exceeded the numbers recorded in recent weeks. The 4 deaths from diphtheria showed a slight increase upon the number in the preceding week, and included 2 in Glasgow, where 2 of the 3 fatal cases of scarlet fever were also recorded. The 3 deaths from "fever" showed a marked decline from recent weekly numbers, and included 2 in Dundee. The deaths referred to diseases of the respiratory organs in these towns, which had increased from 141 to 173 in the preceding three weeks, declined again last week to 142, but exceeded by 37 the number in the corresponding week of last year. The causes of 75, or nearly 12 per cent., of the deaths in the eight towns last week were not certified.

HEALTH OF DUBLIN.

The death-rate in Dublin, which had declined in the preceding four weeks from 26·4 to 18·8 per 1000, rose again to 20·1 during the week ending June 6th. During the first nine weeks of the current quarter the death-rate in the city averaged 24·1 per 1000, the rate for the same period being 27·8 in London and 20·9 in Edinburgh. The 136 deaths in Dublin during the week under notice showed an increase of 9 upon the number in the preceding week, and included 2 from whooping-cough, 1 from "fever," and not one either from small-pox, measles, scarlet fever, diphtheria, or diarrhoea; thus only 3 deaths resulted from these principal zymotic diseases, against numbers declining from 7 to 1 in the preceding three weeks. These 3 zymotic deaths were equal to an annual rate of 0·4 per 1000, the rate from the same diseases being 2·0 in London and 1·2 in Edinburgh. The fatal cases of whooping-cough, which had declined from 7 to 0 in the previous three weeks, were 2 last week. The death referred to "fever" was certified as typhoid fever. The 136 deaths in Dublin last week included 20 of infants under one year of age and 37 of persons aged upwards of sixty years; the deaths both of infants and of elderly persons showed a slight increase

upon the numbers recorded in the preceding week. Two inquest cases and 3 deaths from violence were registered during the week, and 55, or more than a third, of the deaths occurred in public institutions. The causes of 13, or nearly 10 per cent., of the deaths last week in the city were not certified.

THE SERVICES.

Surgeon-Major Arnott, M.D., has been appointed Physician of the European General Hospital, and Surgeon H. P. Dimmock to be Physician at the J. J. Hospital, in succession to Surgeon-Major Arnott.

NAVAL MEDICAL SERVICE.—The following appointments have been made at the Admiralty:—Staff Surgeon Richd. J. Barry to the *Australia* (dated June 4th, 1891)—Surgeons: John J. Dinnis, M.D., to the *Phaeton*, Horace Elliott, M.D., to Malta Hospital, and Edward J. Morley, to the *Tyne* (all dated June 4th, 1891); Hugh W. Macnamara to the *Pembroke*, and Chatworth L. Nolan, M.B., to the *Excellent* (both dated June 5th, 1891); Edward Cuffey, M.B., to the *Starling* (dated June 18th, 1891). In accordance with the provisions of Her Majesty's Order in Council of April 1st, 1881, Fleet Surgeon Alex. Blood Trousdell, M.D., has been placed on the Retired List of his rank at his own request.

MILITIA MEDICAL STAFF.—Surgeon-Major C. Brook, 3rd Battalion, the Lincolnshire Regiment, resigns his commission; also is permitted to retain his rank, and to wear the prescribed uniform on his retirement (dated June 6th, 1891).

VOLUNTEER CORPS.—2nd Volunteer Battalion, the South Wales Borderers: Honorary Assistant Surgeon E. P. King resigns his commission; also is permitted to retain his rank, and to continue to wear the uniform of the Battalion on his retirement (dated June 6th, 1891).

Correspondence.

"Audi alteram partem"

ASPARAGUS AS A DIURETIC.

To the Editors of THE LANCET.

SIRS.—The letter on the above subject in your last issue has decided me to send my own experience on the matter. On three occasions (the last being in May this year) I indulged rather heartily in this, a very favourite vegetable of mine. The result was not only the characteristic odour of the urine, but also an increased frequency of desire for micturition, though the actual amount of excretion was considerably diminished. The attack on each occasion woke me up in the early hours of the morning with deep cutting pains in the perineum and in the glans penis, while the desire for micturition forced me to rise from bed every few minutes for about an hour; after that I fell asleep and was no more troubled. It seemed to me as if the urine were highly concentrated, and hence irritating; while the peculiarly unpleasant cutting pain suggested the passage of gravel, or of some kind of crystals. I remember wondering whether it was due to a great amount of sparteic or succinic acid, possibly in a crystalline form. Need I say I have for the future foresworn asparagus.

I am, Sirs, yours faithfully,

London, June 10th, 1891.

M.B. CANTAB.

To the Editors of THE LANCET.

SIRS.—Dr. Wilks asks a question which circumstances have led me to investigate with great care during the past month—viz., "Has asparagus a stimulating or inhibiting action on the kidneys?" At any rate in one case where every detail has been within my personal knowledge, I reply, "a very marked inhibiting action." Its action in this respect is, however, not uniform; but very carefully conducted observations show the inhibiting action to occur in at least five cases out of six. I may trouble you at some other time with details of experiments as to the nature of

the chemical bodies found in the urine after asparagus has been eaten. I remain, Sirs, faithfully yours,

C. MEYMOTT TIDY.

Mandeville-place, Cavendish-square, W., June 6th, 1891.

To the Editors of THE LANCET.

SIRS,—In reply to Dr. S. Wilks's query as to the action of asparagus on the kidneys, I would say that I have always been a free eater of this vegetable, and, with the multitude, for a long time believed it to be a diuretic. But on careful examination I have come to the opinion that this conclusion has been reached simply on account of the characteristic odour which it conveys to the urine a few minutes after it is eaten. Circumstances led me to doubt its diuretic action, and a careful estimate has shown me that, after two good meals of asparagus in the day, the quantity of the urine will be reduced quite one-third of the average—the same quantity and kind of drink being taken as usual. The urine becomes high-coloured, and deposits, chiefly lithates, are usual. The watery element appears reduced. The vegetable, when freely taken, has also a decidedly calmative effect on sexual feeling. An old friend of mine, who has for years eaten freely of the vegetable in the belief that its action on the kidneys was beneficial, describes the effects upon himself as lessening the quantity of urine and thickening it, and producing a feeling of heaviness and fullness.

I am, Sirs, yours faithfully,

June 9th, 1891.

F.R.C.S.

To the Editors of THE LANCET.

SIRS,—In answer to Dr. Wilks' question as to the diuretic action of asparagus, I beg to say that I have had ample opportunity, personal and otherwise, of testing the fact. In Russian Poland during May and June enormous quantities of asparagus are consumed, the favourite kind being the "Hanover colossal," or what is known here as the "giant" asparagus. They are only eaten when white, and are always cut under ground. The green ones, such as we eat here, are given to the pigs. The diuretic action is marked, but the quantity consumed of course considerably affects this. In Poland a person would perhaps eat a bundle of sixty at a meal, while here ten or twelve pieces are about the average eaten by one individual, I should think. I always heard it spoken of there as diuretic.

I remain, Sirs, your obedient servant,

FREDERIC VICARS, M.R.C.S., L.R.C.P.

Cadogan-street, S.W., June, 1891.

"THE NATURE AND NAME OF INFLUENZA."

To the Editors of THE LANCET.

SIRS,—In your last issue Dr. T. Glover Lyon invites discussion as to the nature and name of influenza. I think, however, he attaches undue importance to the primary affection of the central nervous system as distinguished from local irritation. That the disease is characterised by intense nervous prostration I admit, but this I believe to be secondary to the irritation of poisonous germs on the peripheries of the nerves. A far more appropriate and scientific name for influenza would, I submit, be "epidemic pneumonia," for a transient, although often severe, congestion or hepatisation of the lungs is an almost constant concomitant of an attack of the real disease. This peculiar pneumonia is characterised by the suddenness of its invasion and the rapidity of its disappearance; it seldom passes into the second stage, there is often little or no expectoration, and not infrequently no cough; but one rarely fails to find well-marked dulness at the base of one lung, usually the right. I doubt whether this transient hepatisation be true inflammatory exudation—nay, whether it be true inflammation at all. I believe it to partake more of the nature of an exudation, analogous to the rash of urticaria &c. That the contagium of influenza is an air-borne germ there can, I think, be no doubt; the sudden invasion, the large number of persons simultaneously attacked, the fact that ships far out at sea are suddenly invaded, all point to an atmospheric influence, an atmosphere laden with pathogenic germs. I venture to submit that the exciting cause of influenza may be analogous to that of hay fever; at any rate, the action of pollen in exciting hay asthma gives us a clue to the influence of some, possibly closely allied, pathogenic spore in causing influenza. We know from the experiments

of Schütz that breathing an atmosphere impregnated with the minute spores of *aspergillus fumigatus* (a fungus common in brown bread and diseased barley) causes pneumonia in the lower animals, and would probably do so in man. It is surely no very far-fetched hypothesis to assume that some similar or closely allied germs may act as irritants to the air passages and peripheral nerves, and excite the peculiar pneumonic exudation and nerve prostration so characteristic of influenza. It is noticeable that there has been an unusual spasmodic cough prevalent this year which closely simulates whooping-cough, and is unaccompanied with any detectable lung mischief, which is, to my mind, strongly suggestive of irritating particles in the atmosphere. The symptoms and sequelæ of influenza, as described by different writers, are so numerous and heterogeneous that it seems impossible, or at least unscientific, to ascribe them all to any one disease. It seems to me more rational to attribute them to some all-pervading atmospheric poison, be that what it may, which profoundly modifies and aggravates all existent illness, but seems to exert a specially noxious influence on the respiratory tract, and which causes all and every illness to assume a graver and more adynamic type. This is, I believe, the explanation of the intense nervous prostration and the protean and often contradictory symptoms of influenza. The effects of remedies, the success which has everywhere attended the administration of salicylate of sodium in the first stage and quinine (both germicides) in the second, point strongly to a germ rather than a central nerve origin of influenza. I quite agree with Dr. Glover Lyon that "influenza" is an unsuitable and unscientific name for the present epidemic, but I venture to submit that "transient" or "epidemic pneumonia" would be a more appropriate name than "centro-neural fever."

I am, Sirs, yours faithfully,

CHAS. EGERTON FITZ-GERALD, M.D.

Folkestone, June 7th, 1891.

THE PROPOSED TEACHING UNIVERSITY.

To the Editors of THE LANCET.

SIRS,—There is a question in connexion with the proposed Teaching University for London which ought to be considered early. It is in reference to denominational colleges. Should they be admitted to affiliation and, if, admitted, what should their standing be? The powers of a college at Oxford or Cambridge in the matter of so-called religious tests have been defined by legislation, and it would certainly be desirable in any new University which may be founded that these questions should be settled before starting, otherwise they might give rise to distracting disputes, and very possibly to ruinous litigation; there is no need to dwell on the evils of postponing the settlement of the matter. In view of how important a part the medical faculty must play in any future University, it would be desirable that the opinion of the profession on an issue that must touch it nearly should find expression in the columns of THE LANCET.

I am, Sirs, your obedient servant,

Lambeth Palace-road, June 6th, 1891. WALTER EDMUNDS.

THE RECENT FATAL FIRE AND ITS WARNINGS.

To the Editors of THE LANCET.

SIRS,—In an annotation in your issue of June 6th the advice is given that water should always be kept at hand where mineral oil lamps are in use. Will you allow me to draw attention to the fact that, serviceable as water is in extinguishing other burning materials, dry sand or earth is the best means of putting out blazing oil. Fortunately it is not difficult to keep a supply in every room. Fashion impels people nowadays to decorate their houses with porcelain vases of varied shape, and often of ample dimensions. All these should be kept full of sand; they are thus both rendered much less liable to be upset and made to fulfil a more than merely ornamental purpose by storing just where it is wanted a ready means of extinguishing that conflagration which may at any time arise where oil lamps are used. This simple device adds greatly to the safety of the house, which at present seems to depend largely on the