the only instances of its failures I can remember were complicated with laryngeal and tracheal effusions or were primarily cases of membranous croup. It always appeared to me that this solution, which is a most powerful antiseptic, has both a topical and general effect in neutralising the diphtheritic poison, as it not only hastens the detachment of membrane from the throat, but it appears to lessen the chances of secondary affections, whether in the form of paralysis or renal incompetence. But for these effects to be obtained it is necessary that the solution should be freely and frequently administered, so as to keep the fauces as nearly as possible aseptic. And with the same view I have always used sulphurous acid or solutions of carbolic acid either as a spray or to swab the throat with. My estimate of the value of euechlorine in diphtheria is supported by the testimony of Mr. T. Schollick, who was for several years medical officer of the Isolation Hospital for this union, and who had opportunities of testing its effects during more than one severe epidemic of this disease. It may seem late to propose a remedy for diphtheria in the face of the remarkable results obtained by the use of antitoxin, which possesses the advantage of controlling the laryngeal and tracheal affections, so often a cause of fatality. But circumstances may even yet arise to render a substitute for the serum a not unwelcome addition to our resources.

I am, Sirs, your obedient servant,
 Guildford, Feb. 5th, 1895. HENRY TAYLOR.

"ENUCLEATION OF HYDATID CYST OF LIVER."

To the Editors of THE LANCET.

SIRS,—While congratulating Mr. Morgan on the satisfactory result in the case of hydatid cyst of the liver published in THE LANCET of Feb. 9th, I am anxious to draw attention to a method of treating these cases which I believe to be an advance on that followed in Mr. Morgan's case. In a paper published in 1891,¹ and again in January this year, I explained the method of treating all cysts which are not suppurating by incision, evacuation of the contents, and parasitic cyst only, and closure of the abdominal wound without drainage. By simply removing the daughter cysts and the parasitic endocyst, which has no organic connexion with the adventitious cyst, and by not making any attempt to remove or separate from surrounding parts the latter fibrous investment, the danger of hæmorrhage is entirely avoided. No doubt some omental cysts can be removed with the fibrous cyst entire, but this should not be attempted in liver cysts. Although this method seems after four years to be but yet little practised in England, it has been extensively adopted in Australia, and from your Australian Correspondent's account of the Medical Society of Victoria's meeting, reported in THE LANCET of Feb. 9th, it would appear, successfully. No doubt it is not always necessary, except in the case of very large cysts, to invert and suture the adventitia as I originally suggested; neither is it, I think, desirable to anchor the evacuated cyst to the parietal peritoneum, as advocated by some Australian surgeons, unless any accidental contamination should have occurred at the operation.—I am, Sirs, yours faithfully,

King-street, Leicester, Feb. 11th, 1895. C. J. BOND.

AN APPEAL.

To the Editors of THE LANCET.

SIRS,—I desire to make an appeal to the profession on behalf of Mrs. Julia Guthrie, who is a widow of the late Professor Guthrie, at one time President of the Royal College of Surgeons. Mrs. Guthrie was married at St. Ann's, Soho, early in 1856, and was left a widow in that year with one son, who has since died. Mrs. Guthrie was left on the death of her husband unprovided for, but the son was during his lifetime assisted by members of the family. For many years Mrs. Guthrie has been dependent upon her relatives, who have now all died, and she is left alone in the world. A few months ago I was instrumental in obtaining a pension of £18 per annum for Mrs. Guthrie from the British Medical Benevolent Fund, which at the present moment is sufficient to pay for her one room. It is desired to make a provision for her life of the very moderate sum of £1 per week, and as Mrs. Guthrie is nearly seventy-five

years of age I confidently appeal to the profession to assist in this charity. An account has been arranged at the Capital and Counties Bank (head office, Threadneedle-street, E.C.), and any subscription can be paid to them to the "Guthrie Relief Fund" or to the honorary secretary, Mr. R. Brandreth, LL.D., solicitor, 2, Duke-street, Brighton, of whom any further particulars of Mrs. Guthrie's sad case can be obtained.

I am, Sirs, yours obediently.

ALFRED UPTON, L.R.C.P. Lond., M.R.C.S. Eng.
 Lansdowne-place, Hove, Brighton, Feb. 13th, 1895.

"FILARIA LOA."

To the Editors of THE LANCET.

SIRS,—With reference to the filaria loa described in THE LANCET of Oct. 27th, 1894, supposed to be found only in Africa, I would mention the following case. A few weeks ago a horse was brought to me with a filaria moving rapidly about in the ante-chamber of its left eye. The filaria appeared about an inch and a half long, tapering at one end, blunt at the other. I ordered some perchloride of mercury solution to be injected through the cornea to kill it. Unfortunately for the specimen, but fortunately for the horse, when the aqueous escaped through the puncture the filaria also wriggled through, fell on the ground, and was lost, as I was not informed of the result in time to search for it.

I am, Sirs, yours faithfully,
 Mission Hospital, Kashmir, Jan. 7th, 1895. ARTHUR NEVE.

THE MEANS OF CULTIVATING ORGANIC REACTIONS IN AIR AND THEIR RELATION TO ZYMOTIC DISEASE.

To the Editors of THE LANCET.

SIRS,—The indefinite nature of recorded research due to the natural difficulties of demonstrating the facts involved in atmospheric pollution by sewage is exemplified in the following statement made at a recent meeting of the London County Council regarding sewer gas in London. The Main Drainage Committee had the subject under consideration, and when they learned from the experts that sewer gas was free from germs they were very much astonished. They had, however, referred it to the experts to say whether sewer gas was not injurious to public health "in some way" other than through the presence of bacilli. The evidence available in proof of pathogenic origin in organic reactions in air as yet is more valuable in its indications than in actual facts. The effects, however, of organic pollution in air were early noticed by me during very protracted experiments in aerifying sewage and other liquors between 1878 and 1886. These effects, regarded as distinct from odour, were always apparent during the treatment of sewage in any stage of putrefactive ferment, and as possessing a distinct bearing on a subject which I believe requires investigation on its own account.

The first actual evidence of pathogenic origin in air is supplied by the result attending the influenza inquiry instituted by the Local Government Board. It is simple history that a subsequent official inquiry by the Board attributed the malady chiefly to the presence of refractory organic impurities in the air. It was now apparent that the march of events by investigation must soon supply the corroborating details which I felt were required to clearly indicate the direction and means by which a real demonstration of the facts might be conveniently obtained. These details were furnished in the highly important conclusions advanced by Dr. Percy Frankland, F.R.S., dealing with the subject at last year's Congress of the British Association at Nottingham, which, I venture to think, afford the clue to the ultimate results of phenomena described, and also, short of demonstrating the facts, define the modification influence which operates in nature through organic reactions in air. The following quotation from Dr. Frankland's address on Bacteriology at the Congress of the British Association in 1893 contains the conclusions referred to:—1. "The science of bacteriology dates from the introduction by Koch of the method of pure cultures some twelve years ago. Microscopical determinations, at first entirely relied upon, had given way more and more to chemical tests, but the differentiation and identification of 'particular species' remain very difficult, and, indeed, become more and more so." Comment is needless, beyond asking the question, Why, unless a modifying

¹ Brit. Med. Jour., April 7th, 1891.